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Andrews University  
School of Education

THE NATURE OF MENTORING AND ITS RELATIONSHIP  
WITH ROLE SOCIALIZATION FOR THE  
ACADEMIC NURSE ADMINISTRATOR

A Dissertation  
Presented in Partial Fulfillment  
of the Requirements for the Degree  
Doctor of Philosophy

by  
Anna Rambharose Vance

December 1995

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A dissertation  
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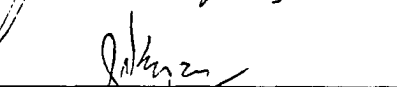
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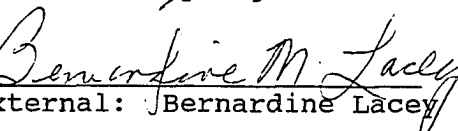
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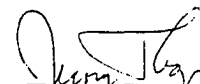
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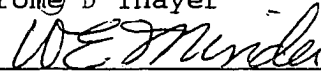
  
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## ACKNOWLEDGMENTS

Meeting the challenges of a doctoral program takes dedication and commitment, not only on the part of the student, but on the parts of many other people as well. Without the encouragement of such individuals, an arduous task would prove much more difficult, if not impossible.

My sincere appreciation goes to these people whom I could never thank enough. I wish to thank:

Dr. Edward Streeter, the chairman of my doctoral committee, for his patience, time, and effort in guiding me during my entire doctoral program

Dr. Jimmy Kijai, statistician and committee member, for his cooperation and endless time which enabled the statistical analysis in this study to become a reality

Dr. Zerita Hagerman, committee member, for her invaluable advice and assistance

The academic nurse administrators who took part in this research by completing the instrument

A special thanks to my entire family and to my dear friend Johnny Alcorn for the encouragement, patience, and support

To Adelaide Brackett, for her contribution in  
helping me make my dream come true.

ABSTRACT

THE NATURE OF MENTORING AND ITS RELATIONSHIP  
WITH ROLE SOCIALIZATION FOR THE  
ACADEMIC NURSE ADMINISTRATOR

by

Anna Rambharose Vance

Chair: Edward A. Streeter



ABSTRACT OF GRADUATE STUDENT RESEARCH

Dissertation

Andrews University

School of Education

Title: THE NATURE OF MENTORING AND ITS RELATIONSHIP  
WITH ROLE SOCIALIZATION FOR THE ACADEMIC NURSE  
ADMINISTRATOR

Name of researcher: Anna Rambharose Vance

Name and degree of faculty chair: Edward A. Streeter, Ed.D.

Date completed: December 1995

**Problem**

Many academic nursing organizations have a great need for leaders who can handle the complex mix of academic administration, health care facilities, and curriculum demands. These administrators are not directly trained to be professional academic nurse administrators. It was the purpose of this study to investigate the nature of mentoring as a vehicle for socializing academic nurse administrators.

**Method**

A survey research methodology was used to study the characteristics of the mentor-protégé relationship. The Mentoring Role Socialization Survey was the instrument used

for data collection. For the purpose of this study, the instrument was divided into three sections: Professional Information, Mentor-Protégé Characteristics, and Role Socialization Functions.

### **Results**

The results of the study indicated that academic nurse administrators with mentors reported the relationship as positive, supportive, intellectually stimulating, and encouraged independent growth. There were no significant differences between the nurse and non-nurse mentors on these characteristics. Academic nurse administrators reported receiving more guidance in clinical activities and encouragement to write and publish their ideas by nurse mentors than by non-nurse mentors. The length of the mentoring relationship was significantly related to most of the functions carried out in the mentor-protégé relationship. Functions included: providing personal and career counseling, being taught new skills, encouraging decisiveness, writing, and publishing ideas. Academic nurse administrators who did not have a mentor were highly supportive that a mentor would have made a difference in their career progress and would recommend a mentoring relationship for prospective nurse administrators.

### **Conclusion**

Based on this study, a mentoring relationship was predominant among the administrators. Suggestions for

further research include a longitudinal study, at 3-year intervals, of the academic nurse administrators who participated in this study. Qualitative research should be conducted to reveal the possible mentor characteristics and functions that might relate to the leadership style, administrative effectiveness, and role socialization of future academic nurse administrators.

## CHAPTER 1

### INTRODUCTION

Professional nurses who aspire to become effective academic nurse administrators are faced with multiple challenges in the existing business academic environment. Many professional nurses may not acquire the business management and leadership skills necessary for success in the role of an academic nurse administrator at the master's- or doctoral-level preparation. Formal education is only one factor that contributes to the professional development of a nurse for administrative academic responsibilities. Even doctoral programs do not fully prepare today's applicants for the challenges in an executive-level position such as an academic nurse administrator. Time prohibits development of the managerial knowledge and skills essential for complex decision-making, fiscal accountability, and other managerial skills needed to socialize into a new role.

Due to the increased need for master's- and doctoral-prepared nurses in administrative positions, many are placed in strategic positions soon after

completion of the degree requirements. The curriculum in these programs does provide theory content, but an actual experience with a mentor can become useful to administrators in these turbulent times. The development of formal mentoring programs can strengthen the role socialization of academic nurse administrators.

The direct assets of a mentor relationship to a professional group are many. Such a relationship will socialize a person or persons to the professional norms, values, and standards, will provide entry into the inner circles of the profession, and will promote the profession's growth by ensuring continuity and quality of leadership. This is the role socialization process that fosters critical elements in the development and advancement of promising professionals such as academic nurse administrators.

Professional and social support from superiors and mentor relationships have also been found to be important factors in administrative development. According to Buchanan (1984) transitions into administration may be "facilitated by a powerful and influential person within an organization acting as a mentor or sponsor, a key growth factor in providing visibility, credibility, and acceptance" (p. 148) for the new nurse executive.

In fact, the concept of mentoring, based on reported success in business and academic settings, is being recognized as an important developmental process for nurse executives (White, 1988). A mentor is defined as someone who serves as a career role model who actively advises, guides, and promotes another's career and training. This phenomena is viewed as a process that occurs between two people with the mentor as the more experienced guide for the learner, or mentee. Mentors often hold the key to career advancement and role socialization into a new position for aspiring leaders. The promotion of mentoring relationships by nurse executives as a strategy to develop and strengthen leadership within the profession could better prepare aspiring nurse executives to meet the diverse demands of this role in today's complex academic environment. Ross (1984) noted that the absence of a role model and the mentoring process deprived these younger managers of opportunities.

The need for academic nurse administrators is great in schools of nursing. With increasing numbers of women in top administrative positions, there is more opportunity for nursing leaders to assume mentor roles to facilitate future academic nurse administrators into their functional roles. Strategic planning, involving top management support to create a climate focused on

assisting new leaders to accept role responsibility, should be provided.

Academic nurse administrators who are established need to exhibit behaviors that reflect vision, be able to demonstrate the ability to influence others, and act on the importance of modeling values conducive to maintaining and fostering excellence in institutions and health-care settings.

It was not until 1977, when Vance completed her study, that the mentor concept was identified in nursing literature as an important factor concerning career development within the nursing profession. In the study of contemporary influentials in American nursing, it was found that there was a positive correlation between having reputational influence in nursing and having higher academic degrees, especially the doctorate. It was also noted that "nurses prepared at the doctoral level frequently become the influential leaders who use their knowledge and power to impact the profession" (Vance, 1977, p. 137).

Mentoring is a concept that has been used in several contexts, both in nursing practice and nursing administration. Levinson (1972) and Sheehy (1974) identified it as a component of the adult developmental stage that is important in helping the young adult to

identify a dream or goal, and to assist in the achievement of this identified goal.

Professional growth and maturation occur over time and through the efforts of members of the profession. In order for growth to occur in a systematic and effective manner, this process must be coordinated to produce the desired results. Little information is available regarding the characteristics that make mentoring effective towards role socialization, especially in the academic administrative setting.

While the establishment of a mentor is beginning to be espoused as an important developmental process for nursing, very few studies have been conducted that relate to this topic. Little information is available about the nature of mentoring and its effects on the career development specific to academic nurse administrators.

Zimmerman (1983) studied selected samples of female nurses with earned doctoral degrees. The analysis of data provided preliminary evidence for the value of mentoring for nurses. In contrast, Spengler (1982) concluded from research results that the mentor-protégé relationship was crucial in many aspects of career satisfaction and that a mentoring system should be devised in nursing to foster these relationships. Zimmerman concluded that career mentors were most



important to success and that respondents would be likely to serve as mentors for others.

The concept of mentoring may be crucial in promoting role socialization. This process can improve the degree of understanding and communication of role expectation, role formation, and role identification. Any role ambiguity or confusion can be minimized as goals are accomplished to attain the desired role such as that of an academic nurse administrator.

Literature indicated that mentoring was found to be important to the development of the executive role in the business setting. Thus, this study sought to examine the nature of mentoring as a mechanism to facilitate adjustment to the role of an academic nurse administrator. Mentors serve as role models, but their function goes beyond that of encouraging active professional socialization and promoting career advancement (Atwood, 1979; Campbell-Heider, 1986; Vance, 1982).

Because the field of socialization has emerged from various traditions, it has been defined in numerous ways. Socialization can be viewed as the process by which someone learns the ways of a given society or social group so that one can function within it. This can also refer to the process whereby individuals acquire the personal system properties such as knowledge, skills,

attitudes, values, needs and motivations, cognitive, affective and other socially relevant behavior necessary to shape their adaptation to the physical and sociocultural setting in which they work.

### **Statement of the Problem**

In view of the above discussion, this study proposed to examine the nature of mentoring and its relationship with role socialization for the academic nurse administrator. The mentoring factors and the effects these factors have on role socialization for academic nurse administrators are not known. If these factors can be identified as effective, then mentoring could be operationalized more productively.

Academic nurse administrators, nursing chairpersons, and deans face the problem of not knowing the available pathways to best socialize one to this executive leadership role. Higher education does not provide the answers as to what kind of continuing education, mentoring, or internship programs are available to facilitate continued nurse executive socialization.

Research on mentoring and role socialization is needed to provide new knowledge for this select group of nurse executives. The results of this research can enhance planning for graduate education programs, improve job effectiveness, contribute to greater understanding of

what facilitates an easier role transition, and provide information for planning more effective continuing education programs or curriculum inclusion in the area of nursing administration.

There is a need for well-prepared leadership to envision the development of the organization, to strengthen values, and to recognize the struggles of the system and the people (Allen, 1991). To date, no specific study related to mentoring and its relationship with role socialization of the academic nurse administrator has been completed. This study was an attempt to survey a sample drawn from academic settings to determine if a relationship does exist between mentoring and role socialization.

### **Purpose of the Study**

The purpose of this study was to examine and explore the nature of mentoring and its relationship with the role socialization process among academic nurse administrators. This problem was explored through examination of role socialization characteristics such as career planning in roles similar to those of mentors, career advancement, professional development, and academic success. Based on information in the literature and the obvious need for further research in this area, it was the purpose of this study to answer the following questions:

1. What are the defining characteristics of the mentor-protégé relationship among academic nurse administrators?

2. What academic functions and activities do mentored academic nurse administrators engage in most frequently with mentors?

3. To what extent are academic nurse administrators involved in role socialization functions during the mentoring relationship?

4. Do mentored and non-mentored academic nurse administrators differ in their present executive profile?

#### **Significance of the Study**

Nursing executives and leaders are directly responsible for the success or failure of a school's nursing program. It is the academic nurse administrators who face the challenges of operating an academic program. In many instances, time is spent on the needs and problems of students, teachers, finance, personnel, and other issues addressing areas that deal with state, legal, and political requirements, and clinical and malpractice issues. Because of the increase in the numbers of required prepared academic nurse administrators, many are placed in positions for which they have only academic preparation. Failure of

commitment to the job can result from a lack of practical knowledge and ways to handle the multi-role responsibilities.

The administrator's ability to execute administrative duties successfully should be based on the academic, practical learning, and problem-solving skills obtained from theory and real-life experiences. A limited number of studies exploring mentoring as a strategy to facilitate professional career development have been conducted. Data from a systematic study of mentoring among nurse executives could contribute towards the development of a mentoring framework for use within the nursing profession.

Schools of higher education reflect the concern of hiring prepared academic nurse administrators who are acclimated to their roles and responsibilities. The initial success of new administrators depends in some instances upon the early socialization experience. The failure to clearly transmit the norms and expectations of a particular environment through a logical socialization process creates a great disadvantage to assuming appropriate roles. Recognition of the fact that the prevailing mode of socialization for academic nurse administrations is less than optimal suggests the need to examine the process. Nursing's legitimacy as a profession depends in part upon a nurse's demonstration of superior competence in both the practical arena and

the academic arenas. To do so requires that attention be paid to the socialization needs of new academic nurse administrators to facilitate their potential effectiveness.

Mentoring could be an essential step to facilitate academic nurse administrator's role socialization by assessing and minimizing those factors creating barriers to effective socialization. The recognition and utilization of these elements to direct and structure mentoring programs might increase role satisfaction, productivity, and subsequently facilitate academic nurse administrators' assumption of their new roles within the academic community.

The results of this study could be useful to master's and doctoral programs in nursing, to aspiring academic nurse administrators and educational leaders, and to hospital and health-care agencies who utilize nurse administrators. More awareness could be placed on the need to assist administrators in seeking out role models in mentors who hold specific positions in which they would later want to be. In addition, they would have the practical insight into what the role and responsibilities encompass.

### **Theoretical Framework**

The theoretical and supporting framework for this study was founded on the social learning theory as

identified by Albert Bandura (1977). According to this theory, human beings' thought, affect, and behavior could be significantly influenced by observation as well as direct experience. Bandura viewed human social behavior in terms of a reciprocal interaction between cognitive, behavioral, and environmental determinants. Within this process, people could have the opportunity to influence their own destiny as well as the limits of self-direction (Bandura, 1977, p. vii).

As used in nursing education, role modeling is consistent with the social learning construct of modeling described by Bandura (1987). Bandura used modeling extensively in therapeutic situations and found it effective with clients of widely divergent social and educational backgrounds. Clients were taught new attitudes and behaviors by observing others who modeled these behaviors. Bandura pointed out that people interacted with their environment, and the two were reciprocal determinants of each other. Virtually all learning phenomena that resulted from direct experiences occurred on vicarious bases by observing the behavior of other people and its consequences for them. Bandura noted that people's capacity to learn by observation enabled them to acquire large, integrated patterns of behavior without having to form them gradually over time by lengthy, repetitive trial-and-error methods. This

process of observational learning was essential for both development and survival. Without the benefit of models to exemplify cultural patterns, the social transmission process used to teach language, lifestyles, and other cultural practices would have to be taught to each individual through selective reinforcement of behavior as it occurred. The process of acquisition of new behavior could be shortened significantly by modeling.

Bandura described perceived self-efficacy (PS-E) as the expectation that one would be able to achieve a certain level of performance in a given activity. PS-E is defined as people's judgments of their capabilities to organize and execute courses of action required to attain designated types of performances. It is concerned not with the skills one has but with judgments of what one can do with whatever skills one possesses.

Social learning theorists identify that behavior is learned through two major models: response consequences and modeling. The concept of learning by consequences is the more rudimentary model and is based on direct experience that produces positive and negative reinforcement from individuals' action, whereas most human behavior is learned through modeling.

In Bandura's classic work, the terms "identification, limitation, and observational learning" were employed interchangeably to refer to behavioral



modification resulting from exposure to modeling stimuli" (Bandura, 1969b, p. 219). Bandura proposed that the basic learning process underlying identification was observational learning, which involved imagery formation and verbal coding of observed events. The proposed modeling phenomenon consisted of four components: attentional, retentional, motoric reproduction, and incentive or motivational processes.

Modeling influences learning primarily through specific informative functions. Bandura (1977) noted that during exposure the observer primarily acquired symbolic representations of the modeled activities, which then served as a guide for appropriate performances.

Individuals who are exposed to diverse models can combine aspects of observed behavior into new and innovative patterns. People rarely pattern their behavior exclusively from one source or adopt all of the attributes of the chosen model(s). Individuals usually pattern their observations and their experiences into creative new styles and forms of behavior that fit them uniquely. The more exposure individuals have to a variety of models, the more creative they may become and the less they will behave in a stereotypic conventional manner. A mentor who can also be considered a significant person, a wise and trusted counselor or teacher, or an influential person may be the one who guides the

younger learner, the observer (protégé), through career training.

Through mentoring, the protégé may pick up symbolic representations of modeled activities, which then may be used in the future as a guide for improved and appropriate performance. The mentor coaches the protégé in those activities that will contribute to career development. Through observation and symbolic association, the mentor coaches the protégé in making the right career contacts, attending the right meetings or activities, and meeting the right people who could eventually prove beneficial to future career plans.

The learner or protégé is not a passive recipient but brings curiosity, enthusiasm, new ideas, intelligence, and previously learned knowledge and skill to the situation. This idea supports one of the most important distinguishing features of social learning theory, which suggests that a prominent role is assigned to the individual's self-regulatory capacities (Bandura, 1977). Bandura also indicated that human beings go through a process of selecting, organizing, and transforming stimuli that have an impact on them. By the learner's choosing, incentives and consequences are generated that later influence behaviors. It is the learner who serves as the principal agent over his/her own change. Any factor that influences choice behavior

can have profound effects on the course of personal development.

The concept of mentoring specific to role relationship was not mentioned in the literature with much frequency until recently. Very few research studies have been done to determine its effects on this concept. Researchers who have studied the stages of adult development are discovering that the mentoring relationship can have more profound and enduring effects on individuals than are mentioned as they pursue their career developments and role socialization.

Bandura's theory provided a relevant framework for this study as it sought to answer what the major functions of mentor relationships were that facilitated role socialization of the academic nurse administrator's transition into leadership roles and what effect, if any, this had in facilitating adjustment to role socialization.

#### **Definition of Terms**

Academic nurse administrator, also called a dean or chairperson, is an individual who is a registered professional nurse with a doctoral degree. This person has accountabilities and responsibilities that are primarily administratively focused, involving policy and decision-making, with assumption of responsibility for the management of a baccalaureate or higher-degree

nursing program that is accredited by the National League of Nursing. During the mentoring process, the academic nurse administrator may be referred to as the learner, the novice, the mentee, and/or the protégé.

Career developments is a predetermined sequence or set of activities (i.e., educational activities, work experiences) designed to accomplish an identified career goal(s) in a specified time period.

Mentee (Protégé) is an individual who receives personal assistance and support from a significant person (mentor) in reaching career goals, one who participates in a mentoring/internship program with or without a mentor to facilitate role transition, role competency, and role socialization into the administrative role.

Mentor is one who serves as a career role model and who actively advises, guides, and promotes another's career and training.

Mentoring is the process by which the mentor teaches new skills and promotes intellectual development to the mentee (protégé). This is accomplished by: serving as a guide to acquaint the mentee with the values, customs, and resources of the profession; being an exemplar and providing counseling and moral support during times of stress; fostering personal and professional development; and supporting and facilitating the mentee's career advancement and goals.

Role represents a collection of concepts and processes by which persons acquire the knowledge, skills, and behaviors that make them more or less members of their society. Roles are learned from interaction with others and through role modeling. Role is viewed as stemming from interaction with actors in a social system.

Role model is an individual who serves as an example to be imitated or one who assists another through symbolic association.

Role socialization is acquiring or moving into a role with functions similar to that of a mentor, which results in career development and success in an academic administrative role.

Socialization is a process used to gain knowledge, skills, and behaviors in order to participate as a member of a particular group. The mentor can facilitate the socialization process by helping the protégé learn the requirements of the role.

### **Scope and Delimitations**

The population of interest in this study was the deans and administrators of baccalaureate or higher-degree nursing programs listed in the directory of Accredited Nursing Programs published by the National League of Nursing. This study was limited to five states within the Midwest: Michigan, Indiana, Illinois, Ohio, and Wisconsin.

This study focused on factors of significance among the academic nurse administrators in the geographic location identified. A sample of 200 academic nurse administrators was selected as representative of the population to be studied.

The study also examined the mentoring characteristics, protégé involvement, and its inter-relationship with role socialization to determine if there was a predictable relationship to the academic nurse administrator's responses. The concerns of this study centered around identification and comparison of the mentored and non-mentored groups.

There were limitations to the scope of such a study. The collection of the data using a pencil-paper, self-administered questionnaire was dependent upon the subject's willingness and ability to cooperate and respond accurately.

### **Organization of the Study**

The study was organized into five chapters followed by appendices and bibliography.

Chapter 1 includes the following topics: (1) an introduction, (2) statement of the problem, (3) purpose of the study, (4) significance of the study, (5) theoretical framework, (6) definition of terms, (7) scope and delimitations of the study, and (8) organization of the study.

Chapter 2 surveys selected literature relevant to the study pertaining to mentoring in business, in nursing administration, as well as the prevalence of mentoring in nursing; role socialization and role modeling issues utilized in the academic administration arena, and a summary.

Chapter 3 deals with the methodology that was used in the study. A description of the development of the instrument, pilot study, procedures, population, data collection, and analysis is included.

Chapter 4 contains an analysis of the data and an interpretation of the results.

Chapter 5 provides the summary, conclusions, and recommendations.

## **CHAPTER II**

### **A REVIEW OF THE LITERATURE**

#### **Introduction**

This chapter contains related literature that provides the setting for the development of this study. Literature related to research that has contributed in a theoretical or a practical perspective was explored for its contribution to mentoring and its relationship to role socialization. The areas explored fall into these following sections: (1) background information on mentoring and role socialization, (2) prevalence of mentoring in business, (3) prevalence of mentoring in nursing and nursing education, (4) mentoring for administrative management and organizational socialization, (5) mentoring: value for the protégé, (6) mentoring: value for the organization, (7) the impact of mentoring on career success, (8) socialization for roles, (9) role preparation and role socialization specific to the academic nurse administrator, and (10) summary.



### **Background Information on Mentoring and Role Socialization**

Research on teaching, nursing, business, and other fields has supported the concept of mentoring. Mentoring for school administrators is relatively recent with most research cited in the 1980s. Even though mentoring has been more prominent in the last 20 years, it dates back to Homer's *Odyssey*.

There is a need to guide the next generation to become successful and to improve the nursing profession. Administrative mentoring is a process to do this. Few studies in higher education address the problems of new nurse executives in regard to academic socialization.

The arts place a high value on the mentor approach for training a novice. Aspiring professionals such as musicians and ballerinas learn best from an older accomplished expert. Some of the more established professions have a deep, rich history of mentorship in the practice of medicine, law, and business.

What is a mentor? According to Webster's (*Merrian-Webster's Collegiate Dictionary*, 1993) dictionary a mentor is "a close, trusted, and experienced counselor or guide." A mentor is the more accomplished experienced professional who extends to a young, aspiring person, within the context of a one-to-one relationship, advice, teaching, sponsorship, guidance, and assistance toward establishment in a chosen profession.

Many factors contribute to an individual's professional success. Not all successful persons can be classified as leaders. Various correlations between mentoring and professional accomplishments have been established. Leadership is a complex human quality that some say can be learned, and others speculate about it as an innate human trait. But the attainment of success and the ability to function as a leader have been identified as results of mentorship.

There is considerable literature dealing with mentoring, especially in the area of business, but to a limited degree in nursing. The concept of a "mentor" and "mentoring" is not a new one; it has received renewed attention especially in the area of career development issues.

A role is commonly defined as an organized set of behaviors exhibited by an individual in a given position. Individuals hold expectations and behaviors for their roles (Biddle, 1979). Informally, roles must be examined in terms of the perception, beliefs, and values on the part of the individual functioning in the role. Managers or executives within organizations are given the awesome responsibility of meeting the expectations of the organization, themselves, employees, and consumers.

Poulin (1984) examined the structural and functional components of the nurse executive's position

as perceived by the incumbents. She repeated her 1971 study and used focused interviews to analyze the structure and function of the executive role. Poulin studied the nurse executive's activities, means to complete jobs, and conditions offering performance. The structural data indicated the scope and responsibility of the role including agency and community nursing needs, consumer awareness, and educational ties. The functional data described an increase in coordinating, educating, influencing patient care, and institutional programming, requiring a high degree of administrative sophistication, corporate behavior, and managerial competence. Her findings suggested the need for future-oriented, executive-level nurse executives.

Thus, to become socialized into the professional role, academic nurse administrators must acquire the critical norms, values, and behaviors of the nursing profession. Role socialization models describe a process in which expectations must be internalized, and attitudes, values, and beliefs undergo changes that are influenced by various professional role models. It is not clearly understood how the nurse executive is socialized professionally. Research literature provides insight into role identification and knowledge of how education preparation influences role functioning. Socialization of the nurse executive is influenced by the

type of formal educational program the nurse executive has experienced on all levels of education, since education is a primary force in the way a professional is socialized and develops an occupational identity. Data about nurse executive education and role identification are important, for at that level of professional visibility and power, the nurse must be able to clearly articulate the rationale and justification for nursing practice decision making, and be an advocate for nursing within the health-care setting (Pavalko, 1971).

#### **Prevalence of Mentoring in Business**

Business and nursing literature address the prevalence of the mentoring relationship within the respective professions. The presence of such relationships is significant in the career development of inexperienced business and nurse executives. In the business world, however, the importance and existence of mentors have been largely unheralded. Only recently have business people and researchers recognized the vital role mentors play in the development of corporation executives. The major findings of one study revealed that nearly 7 in 10 business executives had a mentor during the first 5 years of their career (Roche, 1979). A study of nurse executives identified that over 50% of the nurse executives reported having had one or more

mentoring relationship(s) during their career development (White, 1988).

Roche (1979) conducted a study of senior executives that demonstrated that mentor-protégé relationships were fairly extensive among the elite of the business world, but that not every executive had a mentor. Nearly two-thirds of the respondents reported having had a mentor or sponsor, and one-third of them had two or more mentors. The mentor relationship seems to have become more prevalent during the last 20 years. Also, executives who have had a mentor earn more money at a younger age, are better educated, are more likely to follow a career plan, and, in turn, sponsor more protégés than executives who have not had a mentor.

Roche (1979) pointed out that the combination of having a mentor as well as a career plan probably accounted for another finding: those executives who had mentors currently earned more money than those who did not have a mentor. While both mentored and non-mentored executives devoted an average of 56 hours per week to their work, those who had a mentor reported to a greater degree that they were highly satisfied with their career progress. The mentored executives reported somewhat greater pleasure from their work than those who did not have a mentor.

Phillips (1977) studied mentorship in relation to the career development of women managers and executives in business and industry. The study focused upon the concept of career mentorship. Phillips defined career mentoring as the help given by an individual (the mentor) to a less experienced individual (the protégé) in order to help the protégé define or reach goals. Sixty-one percent of women cited on the questionnaire survey said they had one or more cluster mentor(s). The interviews revealed that mentoring was even more common when primary and secondary mentors were identified. Primary mentors were seen as going out of their way to help. They were perceived as being rather altruistic, taking risks, and making sacrifices for the protégé. Secondary mentors, although helpful in career development, were perceived as doing part of their duties to benefit themselves more than the protégé. The relationship was seen as more businesslike, sometimes with strings attached, and there was less caring or risk-taking. The difference between primary and secondary mentors depended entirely upon the perception of the protégé.

Zaleznik (1977) noted in his study that when tracing the different lines of development between men who became managers in the business world and those who became leaders, forming a close relationship with a mentor played a critical part in developing the

individual who became a leader. He described aspects of the mentor-protégé relationship as an important relationship in early adulthood. In reviewing the psychological biographies of gifted people such as Dwight Eisenhower and Andrew Carnegie, the biographies revealed the important role that a mentor played in influencing and developing a young protégé. Zaleznik asserted that the current practice of several large corporations of assigning a vice-president to act as a sponsor for young executives served to develop future leaders.

In Roche's (1979) study, although women executives represented less than 1% of the sample, all who responded reported that they had at least one mentor. This compared with 6 out of 10 men who reported having had mentors. Women also averaged a greater number of mentors than did the men--women had three sponsors to the men's two. Seven out of 10 of the women's mentors were men. Only 1 in 50 of the men had a female mentor, and practically none of those female mentors were in business. Career planning also correlated to mentoring. Over the years more executives who had a mentor followed a career plan than those who did not.

#### **Prevalence of Mentoring in Nursing and Nursing Education**

A review of the nursing literature revealed that studies exploring mentoring relationships identified by

nurse executives were first conducted in the late 1970s. Findings in the Phillips (1977) and Roche (1979) studies paralleled other studies found in the literature review. One of the first studies to explore the prevalence of mentor-protégé relationships within the nursing profession was conducted by Vance in 1977. The study involved 69 identified nurse influentials in various areas of the nursing profession. Eighty-three percent reported mentors in their lives, and 93% reported they were mentors to others. This group reported that mentors helped them by creating career opportunities, promotions, and opening doors; acting as professional role models, providing scholastic and intellectual stimulation, and being a source of inspiration (Vance, 1977).

Research on career development and success has historically focused on male subjects, and early developmental studies investigated the male mentor-protégé relationship. More recently, with women entering the job market in increasing numbers, those involved in the business world have begun to recognize mentoring as an important developmental resource for women. With the concept of mentoring gaining momentum, women in academia and other professions have begun to focus on this concept. Few studies conducted to date have investigated academic nurse administrators as a specific population. There is little information and many unanswered questions



related to the perceived benefits of mentoring. The question of what beneficial impact mentoring has on career development and success as one socializes into a new role is yet to be answered.

Kramer (1974) identified one of the major causes of reality shock in the new graduate as the discrepancy between what was learned in the pre-work socialization period and how things were actually done in the work place. Role transformation takes place as one goes through the period of transition from student to graduate and finally into the career of one's choice. The vulnerability of a new academic nurse administrator in today's complex work place suggests the need for a closer look at methods to bridge the critical time period between graduation and comfortable functioning in the professional administrative role. Implementation of a formal mentoring program is one such strategy that should be considered.

Many professionals advocate mentoring as the best way to learn professional skills. Yet, most of the original studies of mentoring have been conducted by men because leadership positions have traditionally been held by men. In one of the early and noteworthy works by a nursing administrator, Felton (1978) postulated that the paucity of women in leadership positions was related to

the lack of mentors to assist in reestablishing networks that promote career progress, advancement, and success.

Mentoring first appeared in nursing literature in 1977. Since then, mentoring has been described in relation to nursing education, nursing research, clinical practice, and other nursing specialty areas. In nursing literature, mentoring is equaled with the preceptorship, role modeling, apprenticeship, and the nurturing instruction required to assist a novice in the development of nursing skills. It has been suggested that a mentor is useful for each stage of career development and for each area that requires further development. As mentoring is being increasingly studied by nurses, many nurse authors agree that mentoring of aspiring women is essential to ensuring the highest possible level of success and satisfaction in their chosen fields. Findings of the Rawl and Peterson study (1992) suggested certain recommendations for those interested in pursuing careers in nursing education administration. They identified that an active, involved, helpful mentor could make a difference in career development. From the descriptive data on the mentorship relationships experienced by nursing education administrators, it is clear that mentors function and assist protégés differently, and multiple mentors may be desirable to facilitate one's career development.

The recent interest in the mentoring concept as a means for career women to achieve success is based on the male experience in the corporate world. Researchers want to know the relationship between mentorship and corporate success. In the academic setting, studies conducted by Moore and Sangaria in 1979 provided preliminary evidence supporting the potential value of mentoring for female academic administrators. Moore and Sangaria noted in their study of 180 Pennsylvania women who were administrators in higher education that there might be key points in a career where a mentor could be a critical factor in assisting the protégé's moving from one career stage to the next. In a follow-up to a mail survey of administrators in Pennsylvania colleges, Moore and Sangaria conducted interviews with a sample of top-level academic administrators who reported significant mentor relationships.

Mentorship, as preparation for a role in nursing leadership, was addressed by some authors in relation to nursing administration (Cameron, 1982; Hamilton, 1981; Vance, 1982). Increasing numbers of authors have maintained that nursing as a profession has deprived itself of a meaningful and resourceful way of promoting the growth and development of mentor-mentee relationships (Hamilton, 1981). Vance (1982) proposed that as nursing leaders developed working relationships with each other

and became more powerful in both their personal and work lives they were beginning to learn and appreciate the value of mentoring, such as helping and being helped by each other.

Mentorship has been traditionally viewed as most common in academe. May, Meleis, and Winstead-Fry (1982) proposed the mentor relationship as a strategy for developing a growing cadre of nurse scholars, an essential element in nursing's efforts to legitimize itself as a true profession. The role of the mentor was focused on when working with the protégé who was in a doctoral program. Major characteristics of this relationship included role clarification, role rehearsal, and finding the right beginning career spot for the new scholar protégé. Another important consideration was timing. The authors concluded that it was time to develop and implement a model for such a relationship that was tailored particularly to nursing's needs in order to produce and strengthen a cadre of nurse scholars.

Hawken (1980) and Chanings and Brown (1984) explored the mentor relationship as a strategy for developing academic leadership, specifically the role of the dean. Hawken (1980) proposed a relationship within the work setting in which an assistant was identified and served as protégé for a finite period of time to learn

"the art and science" of deaning. She viewed this study as a way to strengthen the academic leadership pool and to provide more knowledgeable and better-prepared individuals for top academic administrative positions, with a higher probability of productivity and survival.

Chanings and Brown (1984) related a mentor-protégé experience that was deliberate, planned, and systematic as part of a decision to pursue the career goals of academic nursing administration. This relationship differed from the typical in that the ages of the mentor and protégé were much closer. This relationship lasted for 1 year, and the evaluations of both mentor and protégé were positive. As a result of the experience they recommended that other aspiring deans attempt to develop mentor-protégé relationships with successful nursing deans, and that those deans cooperate in agreeing to serve as mentors in such a relationship for developing leadership and individuals competent to expand the pool of administrators at that level.

Studies conducted by Spengler (1982) and Zimmerman (1983) reflected samples of female nurses with earned doctoral degrees, providing preliminary evidence for the value of mentoring for nurses. Spengler (1982) concluded from research results that the mentor-protégé relationship was critical in many aspects of career satisfaction and that a mentoring system should be

desired in nursing to foster these relationships.

Zimmerman (1983) concluded that career mentors were most important to success and that respondents would be likely to serve as mentors for others.

One can get along and even succeed without a mentor, but it seems that everyone, including the mentor, protégé, the profession, and the work place gains from such a relationship. Mentor connections can develop individuals who become happier, more competent, and self-assured. They, in turn, are a positive influence when in their area (Vance, 1982).

In a study conducted by Vance (1977) with a sample of 71 individuals identified reputationally as contemporary American nurse influentials, the presence of a mentor was evaluated as important in helping those individuals to attain career goals and to be effective in their positions in nursing. Eighty-three percent of the subjects reported having had at least one mentor, whereas 93% reported consciously serving as mentors to others. Almost 80% of their mentors were female, and over 70% of them were nurses. This supported other findings that a mentor-protégé or mentor-mentee relationship typically occurred within the professional group and work setting. The major functions of the mentors of this group were identified as giving career advice, guidance, and counseling regarding promotion; providing professional

role modeling; providing stimulation intellectually; and inspiring, teaching, advising, and supporting emotionally.

Vance (1977) recommended that the mentor concept be more systematically studied in various areas and at multiple levels within the nursing profession. She asserted that such a relationship would serve to strengthen the profession by increasing its numbers of competent, successful, and satisfied nurses. She concluded that nursing's individual and collective power and effectiveness in the future would depend to a great extent on the willingness of nurses to support each other through strong mentor connections.

Spengler (1982) conducted another study that focused upon the mentor-protégé relationship as it influenced career development in female nurses with doctorates. A majority of the subjects (57%) reported that they had at least one mentor, and of those 64% had two or more mentors. Of those who had a mentor relationship over 99% evaluated the relationship as satisfactory. The planned and sequential development of the careers of those mentored was statistically significantly higher than those in the non-mentored group, although the majority in both groups reported that their career development was not planned and sequential. Of those who did not have a definite career plan, the

mentored group reported a higher satisfaction level and assistance from people close to them. When assessing satisfaction with career progress and sense of accomplishment, the majority of both mentored and non-mentored groups reported satisfaction in both areas; however, there were significant differences between the mentored and the non-mentored groups, with the mentored group reporting a higher degree of satisfaction with career progress and sense of accomplishment. There was a relatively high productivity level in both research and scholarly activities with no significant differences in levels between mentored and non-mentored groups.

Pilette (1981) cited the importance to nursing of the person-centered leadership found in mentoring, and advocated promotion of the mentor relationship as a strategy to develop and strengthen leadership within the profession. With increasing numbers of women in top administrative positions, there is more opportunity for women to assume mentor roles. If nursing is to have influence in health policy, it would come first, to a large extent, through individuals. According to Young (1991) those in influential positions should take on the responsibility of grooming other promising nurses. And those seeking the power of influence should begin early to seek out, at the various steps of their careers,



mentors who would provide the professional and, yes, personal nourishment necessary for success.

White (1988) conducted a survey of academic nurse administrators to determine their perceptions of the role of mentoring in career development and success. The research was conducted as a descriptive study utilizing a self-administered questionnaire to academic nurse administrators who were the chief academic officers of National League of Nursing approved baccalaureate programs. The findings of White's study revealed that 57% of the respondents reported having one or more mentors (primary and/or secondary), whereas 43% indicated they did not have a mentor. A description of the relationship with the most significant mentor revealed that the mean age of protégés was 33 years, and the mean age of mentors was 46 years. The gender of the mentors was predominantly female with the mean duration of mentoring at 8 years. According to White (1988), the mutual initiation of mentoring did not appear to be a pattern previously reported as common to the industrial setting and might indicate important differences between initiation of mentoring in academic and in the corporate business environment. This statement was substantiated by her findings: 58% of the mentored respondents reported that mentoring was mutually initiated with their most

significant mentor, whereas almost one third (32%) reported initiation by the mentor.

Fifty percent of the mentored respondents in this study cited career development as the primary purpose for participating in the mentoring relationships as opposed to job preparation or career promotion. Sixty-nine percent of the mentored respondents reported that they achieved success with the help of a mentor and generally believed others should have one or more mentors to be successful. Eight percent of the non-mentored respondents in the study reported that they would have preferred to have a mentor. When asked in general how important they perceived having a mentor was to the career development of a young potential academic nurse administrator, the majority (80%) of all respondents rated mentoring as "important" or "very important." When asked the same question relative to the importance of a mentor to career success, 71% of all respondents perceived mentoring to be "important" or "very important" for others seeking careers in this field.

According to White (1988),

although it cannot be stated that all academic nurse-administrators need a mentor to succeed in their careers, this study provides support for mentoring as a developmental process to assist with both the career development and career advancement goals of younger individuals seeking careers in academic nursing administration.  
(p. 179)

White (1988) suggested a voluntary type of mentoring and that the gender of the mentor did not appear to make a difference. Therefore, implications exist for the fostering of mentoring in academe for academic nurse administrators and for those seeking careers in the discipline. This is supported by the fact that the majority of academic nurse administrators have served as mentors in the past, and expect to serve as mentors in the future.

White (1988) made the following recommendations:

Mentored individuals should be compared with other mentored individuals in other disciplines regarding the initiation and termination phases of female/female mentoring situations and male/male or cross-gender situations; negative as well as positive mentoring behaviors should be included in future career development research on mentoring; perceived differences between career development and career success should be studied to provide future insight into motivational factors related to participation in the mentoring relationship; the extent to which career satisfaction plays a role in this process should be investigated; and non-mentored academic nurse administrators should be studied for information regarding the potential availability of mentors and the identified differences that exist between mentored and non-mentored individuals. (p. 180)

#### **Mentoring for Administrative Management and Organizational Socialization**

A study conducted by Princeton (1993), titled "Education for Executive Nurse Administrators: A Data Based Curricular Model for Doctoral (Ph.D.) Programs," raised a question on role preparation. Decisions are made about administrative role preparation course work

for students based on the interplay of numerous programmatic, student, and faculty considerations. Subsequently, graduates from Ph.D. programs have, by and large, quite consistent preparation in research; but can such a statement be made about the role preparation for executive nursing administrators? Hoy and Miskel (1987) raised a similar question in relation to educational administration as they reflected on the "state of the science" in that discipline. They believed "that a substantive body of knowledge was available but neglected by both professors and practitioners, and administrative practices could become less of an art and more of a science" if the knowledge base were applied to practice (p.33).

The literature validated that domain and curricular questions have been asked, researched, and reported repeatedly in nursing service administration, but primarily regarding role preparation of nurses at the master's level, with much less attention given to Ph.D. levels (e.g., American Association of Colleges of Nursing, American Organization of Nurse Executives, 1986). Much of the literature in nursing education administration has focused on research-related issues from which knowledge domains and curricular implications specific to role preparation must be inferred (Henry, 1989). Several studies, however, have addressed the

importance of role preparation at the doctoral level for executive nurse administrators. For example, Brimner et al. (1983) conducted a nationwide survey between 1973 and 1980 on 1,964 licensed professional nurses with earned doctorates. Over one half of the participants (56%) held a Ph.D. degree, about one third (34%) held the Ed.D. degree, and the remaining 12% held professional doctoral degrees from nursing and other disciplines. The participants indicated that they were hired into their first academic position primarily to teach; but when hired into positions later in their academic careers, there was a sizable shift from teaching to administrative roles.

Princeton (1993) did a composite description of the first-line nurse educational administrators from National League for Nursing accredited programs. Princeton concluded that although the participants offered numerous comments about administrative know-how that they learned while working on the job, they were clear that in order to optimize Ph.D. programs for nurses who anticipate practice in executive administrative positions, role preparation courses must be planned into their programs. They justified role preparation in addition to research preparation based on the complexity and demands associated with administrative positions, regardless of the administrative level of employment

site. The participants also cited a wide variety of strains and conflicts in their administrative role. Consequently, 31 of the 56 (55%) participants anticipated that they would not continue or were unsure if they would continue as academic administrators.

Barnett (1990) reported that attention had recently been focused on improving administrator preparation programs. Many programs are beginning to include a practicum experience or an opportunity for students to work closely with a mentor during their preparation. Mentoring has become widespread in teacher education and, in some states, has been mandated. A number of administrator programs influenced by teacher mentoring have begun to incorporate a formal intern requirement in their training. North Carolina and Ohio require mentoring before an administrative certificate is granted. State legislatures as well as the Danforth foundation have been promoting mentoring activities.

Pence's (1989) study of the Oregon School Council identified that a 50% turnover of principals was expected in the next few years. As a result, school districts and university programs have been exploring mentoring as a method of assisting aspiring and new administrators in these new roles. Administrative programs traditionally have focused on theoretical approaches versus a practitioner approach. Other fields,

such as business and medicine, have typically used apprenticeships as a means for learning. Administrative programs have utilized internships/practicum to a certain extent. Even with a practicum or internship, practitioners have reported that they needed more help to ease their transition into administrative positions.

Hampel (1987), in her article "Women Administrators: Networking for Success," suggested approaches that would help alleviate the disparity in the number of secondary administrative positions held by women versus men. Responsibility rests first with school policy boards to search for women candidates, to offer creative internship programs, and to increase consciousness with regard to sexism. In addition, mentors can assist women by increasing their professional visibility and helping them to clarify career aspirations (p. 45).

Rogus and Drury (1988) contended that induction programs for new principals were essential. They described an induction model they had developed. Goals of the program were: problem solving, personal/professional support and growth, system understanding, and formative assessment. The mentoring content addressed the goals of developing a personal support system, receiving personalized assistance in

copied with building problems, receiving formative feedback, and assistance toward strengthening their administrative performance. First-year administrators were matched with veteran administrators in similar positions. Effective mentoring programs required training efforts that focused on the major demands of the mentoring role (p. 15).

According to Rogus and Drury (1988), mentor training sessions could include: skills in building a helping relationship; efforts to balance support and challenge; essentials of effective administration; models of supervision and coaching; and problem solving. Mentor training sessions should focus on developing the prospective mentor's ability to be empathetic, to symbolize experience, and to be autonomous (p. 15).

Mentoring programs are used widely within business as well as academia. Although program formats and subject matter vary, the overall goal is common: to efficiently and effectively develop the knowledge, talents, and skills of a less-experienced person through individualized attention from someone with more experience and knowledge in a given area of expertise. Healy and Welchert (1990, p. 17) considered mentoring to be "a dynamic, reciprocal relationship in a work environment between an advanced career incumbent (mentor)



and a beginner (protégé) aimed at promoting the career development of both."

Under the direction of the mentor, the protégé is given immediate access to valuable insights and past experiences. For example, the master watchmaker has years of exposure and practice with all types of timepieces. He has learned, among other things, which tools and materials work well, what problems might occur, and the difference between poor, good, and outstanding quality. Under the master's tutelage, the protégé is guided past the usual trial-and-error pitfalls and is given insights that otherwise might require years of experience to acquire (Newby & Heide, 1992).

Hunt and Michael (1983) suggested that there was a wide array of outcomes to be expected from mentorships. Three outcomes were emphasized in the study: organizational socialization, job satisfaction, and salary. Significant domains described were: learning, affective, and objective outcomes. Organizational socialization described how the mentee or protégé assimilated information necessary to perform his/her job and become a functioning member of the organization.

Riley and Wrench (1985) described one of the mentor's tasks as teaching protégés "the ropes" of their profession. Thus, a mentor could be expected to facilitate the socialization process of the protégé.

During the process of providing career-related and psychosocial functions, the mentor guides and protects the protégé's interests, and is thus likely to convey the necessary knowledge and information concerning the organizational history, goals, language, politics, people, and performance. This knowledge embodies the protégé's organizational socialization (Chao, O'Leary, Waltz, Klein, & Gardner, 1989). Since non-mentored individuals do not receive this type of mentoring support, individuals with mentors would be expected to be better socialized; further, since informal protégés are expected to have higher support from their mentors than formal protégés, it follows that informal protégés would be better socialized in the organization than formal protégés.

#### **Mentoring: Value for the Protégé**

The major benefits of a mentoring program for the protégé are produced from the direct information and the vicarious experiences supplied by the mentor, as well as the degree of confidence that is built by having guidance, assistance, and support during the initial learning process. A mentoring program is beneficial in that it provides individualized attention from someone who has a great deal of experience, a degree of success and respect, and who can supply information that may

otherwise be inaccessible within an organization (Newby & Heide, 1992).

A new employee, for example, may find the process of completing a particular assignment is enhanced and facilitated by first having the steps explained and demonstrated by someone who understands and has had experiences with the process in the past. Insights on the format of drafts and final products, who should be contacted, and potential problems should be given. Additionally, a respected mentor may be helpful in sponsoring and promoting work by the protégé that may otherwise go unnoticed.

The mentor may be viewed by the protégé as a role model, advisor, consultant, and sponsor within the organization (Bernstein & Kaye, 1986; Bolton, 1980) and may also coach the protégé (Orth, Wilkinson, & Benfari, 1987). Each of these may increase the probability of the protégé's success.

#### **Mentoring: Value for the Organization**

The organization may also benefit from mentor/protégé relationships. Mentoring may help resolve some organizational problems such as premature departure, stagnation, boredom, and lack of qualified people in the organization (Bernstein & Kaye, 1986). Mentoring programs may also aid development of managerial talent (Hunt & Michael, 1983). For example, a study conducted by Roche

(1979) identified that "mentored" executives were more likely to follow a career plan and were happier with their career progress and the overall pleasure gained from their work.

In a similar capacity, both formal and informal mentoring programs have been found effective within academic settings. In one study, researchers in Texas employed practicing mathematicians and scientists to serve as mentors for secondary-level mathematics and science teachers (Miller, Thomson, & Roush, 1989). The selected protégés (teachers) had been under pressure due to imposed state-wide teacher testing and appraisals, and their reported overall job satisfaction was low. Results indicated that the participating teachers incorporated the new ideas and materials into their curricula and actively attempted to transmit what they learned to their colleagues and students. Moreover, teacher satisfaction with their jobs improved. The authors concluded that if similar mentoring programs were replicated nationwide, science and mathematics education could be dramatically improved.

#### **The Impact of Mentoring on Career Success**

Informal learning may be more important than formal learning for career development and success, whereas formal education provides a learning base for job entry. The effects of formal schooling on earnings lasts for only 8

years and the effects of formal workplace training for 13 years (Carnevale, 1989). According to Carnevale, informal workplace training yields increased earnings, particularly for managers and professionals.

One type of informal learning comes from actually doing the job--learning what works and what does not from mistakes and failures. Another type of informal learning comes from the guidance of superiors and peers through mentoring and collegial support behaviors. Although mentoring can take many forms, mentoring has been generally defined as a tutorial relationship between a senior employee and a more junior employee in which the senior employee teaches, guides, helps, counsels, and supports the more junior employee to facilitate his/her career development (Hill, Bahnick, & Dobos, 1989; Kram, 1985; Noe, 1988a; Roche, 1979).

Studies point to a strong link between mentoring and career success. Mentoring has been associated with increased job satisfaction, higher earnings, promotion, and advancement (Kram, 1980; Misserian, 1981; Roche, 1979). The majority of these studies, however, rely on personal histories and interviews with already successful people. Noe (1988a) concluded that one consistent finding was that mentoring enhanced one's career development and chances of being successful.

Mentor relationship enhances promotability, enables upward advancement, increases exposure and visibility, helps to avoid controversy, increases challenges, and gives feedback. Yet, the impact of mentoring on success does not seem to be equivalent for men and women (Noe, 1988a). Women do benefit from mentors (Hill et al., 1989; Misserian, 1981; Reich, 1986). However, mentoring does not seem to be available for women as often as it is for men (Cook, 1979; Hill et al., 1989; Noe, 1988a).

Hill et al. (1989) identified that when work achievements were positive, the individual was likely to form perceptions of self as successful. Job satisfaction, although not necessarily linked to performance, is an important attitudinal outcome of mentoring and collegial support. Job satisfaction is viewed as a broad attitudinal construct, including satisfaction with the work itself, supervision, coworkers, pay, and promotions. The performance dimension focuses on achievement and the rewards that accompany it. In business organizations, achievements are rewarded by promotions to higher status within the organization and the increased earnings associated with career progression.

Dreher and Ash (1990), in their study, identified that the mentor system provided a special form of entry

into important social networks. These networks are generally thought of as repositories for valuable information that is often unavailable through formal communication. The capacity to build alliances and coalitions also depends on inclusion in informal networks, as does the opportunity to display talent and competence to senior management. Acquiring important information through informal networks is likely to enhance career success.

Another process potentially linked to career success involves modeling and vicarious reinforcement. Social learning theorists suggest that the protégé acquires important managerial skills by observing an effective senior manager (Bandura, 1977; Decker, 1985). The psychosocial functions of mentoring described by Kram (1985) are likely to affect career outcomes through their effect on the learning process.

### **Socialization for Roles**

The relationship of the mentor and the mentoring process to the protégé or mentee is a socialization process that can be defined by application of Bandura's (1977) social cognitive theory.

Socialization is the process through which an individual acquires knowledge, skills, and values necessary to become a functioning member of society. Society's norms and values are internalized by the

person, thereafter setting the standards for their behavior and attitudes. It is through socialization that one learns how to perform within certain roles, be it sexual, marital, or occupational. Role socialization occurs through two simultaneous processes--interaction and learning. These processes involve diverse agents of socialization such as one's family, peers, school or other institutions, and the mass media (Hurley, 1978).

Professional socialization is the process by which a person acquires the knowledge, skills, and sense of occupational identity that are characteristic of members of that profession. It involves the internalization of the profession's values and norms into one's behavior and self-conception (Cohen, 1981; Hinshaw, 1986; Jacox, 1978). According to Cohen (1981), during professional socialization, neophytes must: (1) learn the technology and language of the profession; (2) internalize the professional culture; (3) find a personally and professionally acceptable version of the role; and (4) integrate the professional role into other life roles. Defining one's professional role is a continuous and cumulative process in which interactions with reference groups play an essential part (Lumm, 1978). Significant others within the work environment most often become the principal reference group for newcomers (Lurie, 1981).



The professional socialization of nurses involves two phases. Initial socialization occurs during formal education, followed by resocialization to a work environment (Leddy & Pepper, 1989; Lurie, 1981). In addition, professional socialization may occur more through "tacit knowledge" assimilated through work experience than through formal training. Upon entering the work setting, novices must integrate professional beliefs acquired through education into a primarily bureaucratic setting. As bureaucratic values frequently are incongruous with professional ideals (Conway, 1983; Leddy & Pepper, 1989), resocialization can result in "reality shock" (Kramer, 1974). Still work remains a dominant agent of socialization because it denotes one livelihood (Lurie, 1981).

Time is an important element in the process of professional socialization. Wolf (1989) suggested it was mainly during the first year of work that novices became initiated to the ways and languages of nursing. This adjustment period is critical. The socialization that new nurses and employees undergo lays the basis for professional standards.

References were made to the effect of preceptorship, the importance of reference groups or social settings, and bureaucratic role expectations needed to professionalize an actual role. Conway (1983)

concluded: "Still unknown are the critical variables that contribute to 'complete' socialization of the nurses who are judged successful in the performance of their roles" (p. 204).

Acquisition of language is a perquisite for the learning of roles and socialization. Learning of acceptable "professional jargon" facilitates not only precise communication, but the socialization of novices to the professional role (Wolf, 1982). Internalization of the norms and values of the professional work culture is another direction towards role socialization. Lumm (1978) claimed one of the most powerful mechanisms of professional socialization was informal interactions with fellow students. This also pertains to colleagues within the work setting. For academic nurse administrators, mentoring could become an interactional and learning process as one socializes into the actual role.

The particular social structure of a given society is one important determinant of the process of socialization, and perhaps the most important determinant (Hardy, cited in Hardy & Conway, 1978). Those norms and values that characterize the society's culture are the "social facts" that the younger members of that society would be expected to adopt as they took on adult roles. Consistent with the conceptualization of roles as social facts is the view that those roles that are considered

appropriate for the individual during progression from infancy to childhood are sequentially made relevant in maturity (Bandura & Walters, 1963; Brim, 1966; Goslin, 1969).

Roles, in the functionalist schema, are viewed as the primary mechanism serving essential functional prerequisites of the social system, and a relationship is held to exist between roles and the social structure that is similar to that which exists between organs and functions in the biological system. While the conceptualization of roles as social facts suggests a kind of fixed or stable character, roles can be seen to change as the institutions of society evolve.

Bandura (1969a) proposed a social learning theory of identificatory processes that was much in keeping with other theorists' position on learning processes. In Bandura's theory, the terms "identification, imitation, and observational learning are employed interchangeably to refer to behavioral modification resulting from exposure to modeling stimuli" (Bandura, 1969, p. 219). Bandura proposed that the basic learning process underlying identification was observational learning, which involved imagery formation and verbal coding of observed events. Bandura proposed modeling phenomenon addressed self-efficacy determinants of career development and pursuits as the choices people made

during formative periods that influenced the direction of their development and shaped the course of their lives. Such choices foster different competencies, interests, and affiliative preferences and set boundaries on the career options that can be realistically considered. Most occupational pursuits depend on cognitive and social competencies that may require years to master. Institutional practices and socialization influences contribute to developmental paths by the types of competencies and self-beliefs they cultivate. Such experiences leave their mark on personal efficacy, which can set the future direction of one's life course by affecting the choices made and the success attained.

**Role Preparation and Role Socialization  
Specific to the Academic Nurse  
Administrator**

The academic nurse administrator in reference to this study can also hold the title of "dean," "chair person," or "director."

The chair of an academic department holds an important role in a college or university. In fact, Bennett and Figuli (1990, p. 6) described "chair" as the "custodian of academic integrity." As the link between the administration and the faculty, the chair soon discovers the ambiguous and paradoxical nature of this midline managerial position. The ambiguity stems from serving as the role of faculty advocate and being

supportive of administration, a duality of purpose that can offer a challenge to new and long-standing chairs alike. The paradox lies in the significance of the role; yet chairs in academia have limited, if any, formal or experiential preparation (Kirkpatrick, 1994).

According to Bennett (1983), the role of chair might be a necessary administrative experience to endure, thus contributing to the position's high attrition and limited desirability. Princeton and Gasper (1991) noted that education for the first-line manager role and on-the-job training and mentoring of chairs are major issues for new chairs. In 1980, the American Council on Education set up the Department Leadership Institute to assist department chairs. Universities are moving to establish developmental programs exclusively for chairs. Major publications are available to aid aspiring, new, and experienced chairs and department advisors and academic leaders in learning about the chair role. Opportunities for first-line management training in nursing still are far more limited than those in industry and service corporations. Indeed, this area is one in which nursing needs to groom the best educators (Kirkpatrick, 1994).

Role transitions inherently provide two types of challenges: the strain of learning the new role and the "dual nature of the transitional process," i.e. giving up

and taking on new roles (Golan, 1981b, p. 31). Learning the profile, roles, and responsibilities of the chair is significant for new chairs in making the transition. Responsibilities of the chair can be described as relationship building, productivity and development, and scholarly development.

In schools of nursing, leadership positions are often the result of personality attributes rather than conceptual, business, and managerial skills. The successful chairperson shares the qualities of any strong leader: vision, determination, goal setting, belief in oneself, action orientation, positive attitude with enthusiasm, closeness to faculty and students, and obsession with excellence (Creswell, 1990). In addition, honesty and competence are important attributes to be demonstrated by the chair.

A study that inquired into the ways in which 30 nursing education administrators perceived themselves as educational leaders revealed that the group held a primary self-identity as nurse rather than as academic administrator (McGriff, 1967). The respondents viewed themselves as scholars capable of influencing nursing on an international basis by shaping a system of professional study in nursing. They did not regard administration, per se, as an area for scholarship and felt dependent on the support of university

administration in order to meet their goals for the profession. Based upon McGriff's findings, discharging the responsibilities of the nursing deanship lay in three cognate areas: nursing, administration, and higher education. The presumption was that nurse educators who acquired knowledge and talents in these three areas would be more effective administrators.

Hall and Mitsunga, with de Tornyay, replicated their 1970 study of nursing deans in 1981 and found that the population at that time reflected changes in social values that occurred in the intervening period. Deans appeared to be more goal directed and to have undergone more anticipatory socialization of the role (Hall et al., 1981). An increasing percentage planned for the deanship early in their careers and acquired the experiential and educational preparation that would ensure competence in the role. The data led the investigators to conclude that aspirants to the nursing deanship increasingly saw the role as one requiring special skills and knowledge. One infers that there is a trend toward carefully planned processes of socialization that are specific to the nursing deanship and which can supersede socialization for previous roles.

Although an earned doctorate is a stated prerequisite to role assumption, the nature of the graduate education thus obtained is an indication of

whether a dean has acquired knowledge relevant to the administrator role. Those deans whose educational programs have provided them with specific information and cognitive skills relevant to their roles can be said to have undergone a form of professional socialization for their roles. They can be expected to be more adept about role expectations, organizational structure, and typical role interactions found in higher education institutions.

The Zimmerman (1979) study presented interesting insights on the development of role prescriptions for leadership, and processes of role socialization. Zimmerman suggested that the type of doctorate was related only minimally to the post-doctoral role and might be a factor of the availability or convenience of the chosen doctoral program. Accordingly, orientation to a role through interest and career experience precedes doctoral study. For educational administrators, the terminal degree may serve as confirmation of a previously established role, as opposed to preparation for a new role (p. 96). This implies that formal academic preparation may not be a significant factor of socialization for nursing deans.

Academic nurse administrators undergo new processes of role socialization when they first enter the academic environment as dean or chairperson. In order to fulfill their role expectations they must undertake new



learning and make various adaptations that will enable them to become full participants of the university community. A nursing dean who has had prior faculty experience will have had the opportunity of establishing an identity within the academic milieu while in a less visible, less vulnerable position. If a dean has had many years of faculty experience, especially in more than one institution, he/she can be expected to have acquired a sophisticated concept of academia, its principles, and practices (Conway & Glass, 1978).

Conway and Glass (1978) among others identified that success in a professional role can be facilitated by a relationship with someone who can provide an accurate conception of the behavioral expectations and demands that constitute the role. The idea of having a role-model mentor teach the role to prepare a new supply of nursing deans is not a new one. Thirty years ago, academic internships were an alternative to doctoral education for the dean's role. Over the years mentor relationships have been considered an effective means of socializing new deans, many of whom had the doctorate but had not had intermediate administrative experiences before taking on full administrative functions. Hawken (1980) cited her own experience in stating that first-hand learning under the guidance of an experienced mentor

was one of the best methods of developing competent leaders in nursing education.

### **Summary**

Clearly, the development of mentoring relationships is seen by some as beneficial to professional socialization for men, women, and nurse academicians; others view the relationship with varying degrees of skepticism. Mentoring activity has been identified in the literature as an important and effective way to socialize new nursing leaders, assisting the novice in the learning of new knowledge and skills, as well as the anticipatory socialization necessary for the acquisition of a new role. Role socialization for academic nurse administrators is a complex, multi-dimensional phenomenon that has been studied only in a peripheral fashion. In this literature review an attempt was made to relate descriptive and research materials from a variety of sources, to construct a theoretical understanding of the nature of mentoring and its relationship to the dimensions of role socialization for the academic nurse administrator. The prevalence of mentoring in business, nursing, and nursing education was described. Components to the value of mentoring for the protégé and for the organization were explored. Issues on the impact of mentoring on career success were addressed. Pertinent material related to role

socialization and the process by which individuals acquire the knowledge, skills, and attributes to articulate that role were described. Finally, information related specifically to the role preparation and role socialization of the academic nurse administrator was presented to complete the perspective of this topic.

## **CHAPTER III**

### **RESEARCH METHODOLOGY**

#### **Introduction**

This chapter consists of the following parts: (1) design of the study, (2) population and sample, (3) development of the questionnaire, (4) pilot study, (5) procedures and data collection, (6) reliability and validity of the instrument, (7) statistical methodology, and (8) chapter summary.

#### **Design of the Study**

This study employed the survey research methodology to investigate mentoring and its relationship with role socialization of the academic nurse administrator. A three-part questionnaire was mailed to 200 academic nurse administrators who met the following criteria:

1. Administrator of a nursing education unit accredited by the National League for Nursing Council of Baccalaureate and Higher Degree Programs
2. An earned doctorate degree in nursing or other earned doctorate
3. Assigned the formal title, "director," "dean," or "chairperson," by the employing institution

4. Employed in a university or college setting that had one or more professional education units headed by administrators with similar titles.

The survey design was used for this study to ascertain the characteristics of mentoring and its relationship with role socialization of academic nurse administrators. The design used facilitated the data collection in a manner that allowed the respondents to answer identified characteristics along with their perceptions and experiences as solicited by specific questions. Tuckman (1978) pointed out that questionnaires were often "used by researchers to convert into data the information directly given by a person" (p. 106). He added that this type of instrument allowed the researcher to measure what a person knew, liked, or disliked, and what a person thought.

Borg (1981) stated that "descriptive research is important in education," and that it was typical for researchers to utilize questionnaires and interviews "to determine the opinions, attitudes, preferences, and perceptions of persons of interest to the researcher" (p. 130).

### **Population and Sample**

Members of the population were identified from the 1993 official list of the National League of Nursing (NLN) Council of Baccalaureate and Higher Degree Programs, which

listed names, titles, and school addresses for chief academic officers of all accredited school of nursing programs in five Midwestern states of the United States. From this source, 40 administrators were randomly selected from each state resulting in a sample size of 200 out of 255 for this study. These administrators held the academic title, "Dr.," the functional title, "dean," or "chairperson," and were in a university or college setting that offered baccalaureate and higher-degree nursing programs.

#### **Development of the Questionnaire**

The questionnaire employed in this study was developed using parts of the Mentor-Protégé Survey developed by Spengler in 1982. Permission was obtained from Spengler to adapt the instrument for this study.

Since Spengler developed the Mentor-Protégé Survey in 1982, this survey has been used by both master's and doctoral students in different settings. Because the focus of this study was on mentoring and its relationship to role socialization of the academic nurse administrator, only parts of the Mentor-Protégé Survey were used. Section A and Section B of the instrument used in this study were adapted from Spengler's Survey. Adaptations were made and items on role socialization functions were added for Section C after a review of related literature and of doctoral dissertations.

Students currently enrolled in graduate and doctorate programs in nursing administration face an uncertain future. The chaos and turbulence caused by unanticipated as well as anticipated environmental changes will challenge nurse administrators to acquire new knowledge continually in areas not previously considered important to the administrative role.

Present programs in educational administration stress learning only through formal course work or through some limited field experiences. Aspiring academic administrators do receive information through course work on technical problems but little help is given on role clarification, socialization, or receiving accurate feedback. Mentoring is part of the formation process to assist one in role socialization. Mentoring can help to reduce the sense of isolation and provide opportunities for protégés to learn skills from their mentor to deal with the demands of the job. It is critical for beginning administrators to have a support system such as mentoring to facilitate role socialization and decrease role conflict and role ambiguity.

Throughout the literature, it was evident that both education and role preparation were necessary for socialization. Thus, the questionnaire developed looked at mentoring, the characteristics of mentoring, and whether or not this experience would facilitate role socialization.

In Section A: Professional Information, respondents were to identify demographic information, the specific degree preparation for their role, their current job title, age, and academic rank.

In Section B: Mentor-Protégé, respondents were to identify if they had a mentor in their career development. Two other questions were to elicit data on how the respondents described the characteristics of their relationship with their most significant mentor and also to reflect on the functions of the mentor. The respondents were classified in two groups, the mentored and non-mentored.

Section C: Role Socialization focused on role socialization functions. The concept of socialization was described to give the respondent a conceptualization of the items in this section when answering them. The specific items for Section C were compiled from research-generated information: Lewis's (1981) study on "Perceptions of Power Held by Deans of Nursing in American Universities" along with Stanton's (1975) study on "Administrative Behavior of Administrators of Baccalaureate Nursing Programs."

The categories used in this study for role socialization closely corresponded with Stanton's items (1975, p. 30). In her study, Stanton used 75 questionnaire items distributed among eight areas of administrative responsibility: budget, community service and relationship,



curriculum and instruction, faculty, institutional policy making, professional responsibility, research, and students. The role functions listed in this section were to identify whether or not mentoring would facilitate socialization into the role as an academic nurse administrator. The respondents were to identify and evaluate each role function on a 5-point Likert-type scale of "never" to "always" on the functions with which they were assisted by the mentor. The last role-function items were also evaluated on a 5-point Likert-type scale of "strongly disagree" to "strongly agree." This part was categorized as "Present Executive Profile" and respondents were to identify to what extent they agreed with the statements as they related to their current administrative role.

### **Pilot Study**

The first draft of the questionnaire was presented to the student's doctoral dissertation committee for critique. A careful revision incorporated their suggestions, wording, and choice of terms. These helped to sharpen the conceptualizations and phraseology of the statements used in the instrument.

A pilot study became necessary. Borg and Gall (1971) strongly recommended the use of a pilot study when a new instrument had been designed or an old instrument had been revised. This process determined if the instrument was

comprehensible and clear to the respondent (Babbie, 1979; Srivastava, 1971).

Following the revisions suggested by the committee the instrument was administered to 30 academic nurse administrators at a dean's meeting. This panel was asked to assess each item as to clarity and whether it represented the domain of mentoring and role socialization being tested. Suggestions were made regarding both the wording and the total number of items. Revisions were made to categorize the content of the questionnaire and this resulted in a three-part questionnaire with 60 items.

The second revised questionnaire was mailed to 50 academic nurse administrators with a doctorate degree. These administrators were previously contacted by phone and asked to participate in a pilot study of the entire questionnaire. A letter was enclosed indicating that this was a pilot study; therefore revisions and changes were appropriate as each item was answered. In this group of 50, some of the administrators were present at the dean's meeting, thus this was a retest for some.

All 50 of the Mentoring Role Socialization Survey Questionnaires were returned. Changes and suggestions for each item were considered to finalize the instrument for this study. The final revisions of the Mentoring Role Socialization Survey appear in Appendix C.

### Procedures and Data Collection

The Mentoring Role Socialization Survey was developed (see Appendix C) and used as the main data-collection instrument for this study. The questionnaire and a cover letter were mailed to all the 200 academic nurse administrators in five Midwest states, namely: Michigan, Indiana, Illinois, Ohio, and Wisconsin. A stamped self-addressed envelope was enclosed with each letter and questionnaire for the convenience of the respondents. All responses were to be sent to me. Included in every packet was a personalized cover letter detailing the purpose of the study, the time frame for completion, and the procedures for anonymity. The letter carried an explanation that the code number at the bottom corner of the questionnaire was for the purpose of helping the researcher keep track of the surveyed materials as they were completed and returned, and of conducting a follow-up for non-respondents. All packets were prepared and mailed at the same time.

A week after the mailing, I sent a follow-up letter reminding the administrators to identify if they did not receive the previous mailing or misplaced the questionnaire. In cases where administrators had not yet received the questionnaire, another copy was issued so they could respond immediately or at their earliest convenience.

In responding to the questionnaire, individual anonymity was ensured as subjects' names did not appear on

the instrument; however, each questionnaire was coded for the purpose of checking the returns. Immediately following the deadline, code numbers were double-checked and the non-respondents were mailed a new packet requesting them to complete the survey material. From the 200 questionnaires sent, 155 or 77.6% were returned.

#### **Reliability and Validity of the Instrument**

Several changes to the instrument were made consistent with repeated feedback from deans, chairpersons, and academic nurse administrators in schools of nursing. To obtain reliability and validity for the Mentoring Role Socialization Survey instrument used in this study several procedures were utilized. The first draft was approved by the doctoral committee. The initial construction of the instrument was given to 30 deans at a deans' meeting to assess items for clarity and content specific to the domain being tested. The second revision was the pilot study, which was mailed to 50 academic nurse administrators with a doctoral degree and who would be considered experts in this area. A letter describing the purpose of the study and asking for suggestions on the format, questions, or content that the respondents might have on the questionnaire was included. The information collected from the suggestions of the deans was incorporated in the revised final questionnaire. The information collected from this panel

was considered reliable and valid to use as the final instrument. The revised questionnaire was then used to carry out the study.

### **Statistical Methodology**

The returned responses of the Mentoring Role Socialization Survey instrument were scored by the researcher. The Statistical Analysis System (SAS) (Statistical Analysis System Incorporated, 1993) was used for data analysis. As measured by the Mentoring Role Socialization Survey instrument:

1. What were the defining characteristics of the mentor-protégé relationship among academic nurse administrators?
2. What academic functions and activities did mentored academic nurse administrators engage in most frequently with mentors?
3. To what extent were academic nurse administrators involved in role socialization functions during the mentoring relationship?
4. Did mentored and non-mentored academic nurse administrators differ in their executive profile?

The basic source used to answer the demographic description of the sample was Section A: Professional Information and Section B: Mentor-Protégé Characteristics--questions 12 through 17 on the Mentoring Role Socialization Survey (see Appendix C). Respondents' scores were obtained

by determining the rated responses for each item, summarizing the item in each domain in terms of percentage, mean, and standard deviation.

For research question 1, Pearson's correlation coefficient was used to determine the correlation between the mentor-protégé relationship and length of relationship, and the correlation between the status of current relationship and length of the mentor-protégé relationship. Pearson's correlation coefficient indicated the extent to which one variable is linearly associated with the another variable (Loether & McTavish, 1980). An alpha level of 0.05 was set for determining the level of significance.

When a sample size is small and a researcher has to use the sample standard deviation to estimate the population standard deviation, the sampling distribution to use is  $t$  distribution with  $N-1$  degrees of freedom (Loether & McTavish, 1980). The difference between two population means is appropriately examined by using the  $t$ -test (Mendenhall, 1987). Thus, it was appropriate to use  $t$ -test to determine whether there was a significant difference between nurse-mentored and non-nurse-mentored administrators on the present mentor characteristics and mentoring functions.

Analysis of variance (ANOVA) technique is used to provide a method for testing the statistical significance of the differences between the means of several samples. This

method provides an indication as to whether the observed differences among the means of the samples may or may not be ascribed to sampling fluctuations (Mendenhall, 1987). ANOVA was used to identify significant differences among the sample means for the mentor-protégé characteristics and the mentor-protégé relationship for the four mentoring settings. For all significant omnibus  $F$  tests, the Student-Neuman-Keuls post hoc multiple comparison procedure was used to determine pair-wise differences.

For research question 2, means and standard deviations were computed to determine the characteristics of the functions and activities in the mentor-protégé relationship. Pearson's correlation coefficient was used to determine the relationship between functions and activities in the mentor-protégé relationship and length of relationship. An alpha level of 0.05 was set for determining the level of significance.  $t$ -test was used to determine whether there was a significant difference between nurse mentors and non-nurse mentors on functions and activities in the mentor-protégé relationship. ANOVA was used to identify significant differences for functions and activities under the four mentoring settings. The Student-Newman-Keuls (SNK) method was used to identify which pairs of means differ following a significant  $F$  ratio.

For research question 3, means and standard deviations were used to compute the role socialization

functions in the mentor-protégé relationship. Pearson's correlation coefficient was used to determine the relationship between the role socialization functions in the mentor-protégé relationship and the length of the relationship.  $t$ -test was used to identify significant differences of mentor-protégé role socialization functions for a nurse and a non-nurse mentor. ANOVA was also used to identify significant differences of mentor-protégé role socialization functions under the four mentoring settings.

For research question 4, means and standard deviations were used along with the  $t$ -test to determine whether there was a significant relationship between the executive profile functions for the mentored and non-mentored nurse administrators.

### **Summary**

The sample for this study consisted of 200 academic nurse administrators who were classified as "director," "dean," or "chairperson" in programs accredited by the National League of Nursing baccalaureate, and higher-degree programs. The sample population was limited to five Midwest states, namely: Michigan, Indiana, Illinois, Ohio, and Wisconsin. The answers to the research questions were provided by the Mentoring Role Socialization Survey. Information presented in this chapter included design of the study, description of population and sample, development of the questionnaire, pilot study, procedures, data collection,



reliability and validity of the instrument, and appropriate statistical methods utilized. The data were analyzed using means, standard deviations, percentages, t-test, Pearson's correlation coefficient, ANOVA, and the Student-Newman-Keuls. The findings are presented in chapter 4 in relation to the demographics and each research question.

## **CHAPTER IV**

### **PRESENTATION AND ANALYSIS OF DATA**

#### **Introduction**

This research was designed to investigate the nature of and relationship between mentoring and role socialization for academic nurse administrators. It also described the characteristics of the mentor-protégé relationship among academic nurse administrators, the functions of mentors, activities protégés were involved in during the mentoring relationship, the extent mentored academic nurse administrators were involved in role socialization functions, and if there was a perceived difference in the executive profile for mentored versus non-mentored academic nurse administrators. The following specific questions were formulated:

1. What were the defining characteristics of the mentor-protégé relationship among academic nurse administrators?
2. What academic functions and activities did mentored academic nurse administrators engage in most frequently with mentors?

3. To what extent were academic nurse administrators involved in role socialization functions during the mentoring relationship?

4. Did mentored and non-mentored academic nurse administrators differ in their present executive profile?

This chapter contained the analysis of the data and was presented under the following headings: (1) demographic description of the administrators, (2) the academic nurse administrator and related experiences, (3) characteristics of the mentor-protégé relationship, (4) functions and activities of mentors, (5) role socialization functions, and (6) mentored and non-mentored present executive profile.

#### **Demographic Description of the Administrators**

The study sample was selected from administrators of accredited baccalaureate and higher-degree nursing programs. Questionnaires were sent to 200 subjects. One hundred and fifty-five subjects returned the questionnaire. Of the 155 subjects who responded, 112 (72.2%) were mentored and 43 (27.2%) were non-mentored. The demographic summary of the academic nurse administrators is shown in Table 1.

Of the 155 academic nurse administrators surveyed in this study, 149 (96.1%) were female; only 6 (3.9%) were male. Their ages ranged from 35 to 66 with a mean of 51.7 years and a standard deviation of 6.53. Most administrators (53.5%) were between 46 to 55 years old.

**TABLE 1**  
**DEMOGRAPHIC DESCRIPTION OF THE SAMPLE**

Variables	n	Percentage
<i>Gender</i>		
Female	149	96.1
Male	6	3.9
<i>Age</i>		
35-45	28	18.0
46-55	83	53.5
56-66	44	28.3
<i>Years of Experience as an Academic Nurse Administrator</i>		
1-5	75	48.4
6-10	52	33.5
11-15	16	10.3
16-20	12	7.8
<i>Years as a Full-time Faculty</i>		
1-5	52	33.5
6-10	61	39.4
11-15	32	20.6
16-20	10	6.5
<i>Academic Rank</i>		
Professor	80	51.6
Associate Professor	59	38.1
Assistant Professor	12	7.7
Instructor	4	2.6
<i>Job Titles</i>		
Chairperson/ Acting Chairperson	55	35.5
Dean/Acting Dean	60	38.7
Director	23	14.8
Coordinator	8	5.2
Head of Department	5	3.2
Administrator	3	1.9
Chancellor/Provost	1	0.6
<i>Education</i>		
B.S.N.	1	0.6
M.S.N.	10	6.5
Ed.D.	38	24.5
DSN	14	9.0
Ph.D.	69	44.5
Other	21	13.5

Approximately half (48.4%) of the respondents had 1-5 years of experience as academic nurse administrators, with another 33.5% having 6-10 years of experience. Only 7.8% had 16-20 years of experience. All had been full-time faculty in a college or university prior to assuming their positions as academic nurse administrators. Their tenure as full-time faculty ranged from 1-5 years (33.5%), 6-10 years (39.4%), 11-15 years (20.6%), to 16-20 years (6.45%). Eighty (51.6%) of the respondents held the rank of professor, 59 (38.1%) associate professor, 12 (7.7%) assistant professor, and 4 (2.6%) instructor.

As indicated by the nurse administrators, seven categories of job titles were identified. The frequency distribution for this variable is shown in Table 1. Over 70% were deans or acting deans, chairpersons or acting chairpersons. About 15% were directors, with the rest as coordinators, heads of department, administrators, or chancellor/provost. Most (78%) held doctoral degrees (Ph.D., Ed.D., DSN). Twenty-one (13.5%) were ABD's (all but the dissertation). One administrator had only a BSN.

### **The Academic Nurse Administrator and Related Experiences**

#### **Prior Administrative Experiences**

Tables 2 and 3 show the related experiences for the academic nurse administrators. The majority of the academic nurse administrators indicated nursing education as the

**TABLE 2**  
**THE ACADEMIC NURSE ADMINISTRATOR AND**  
**RELATED EXPERIENCES**

Administrative Experience	n	Mean Years	SD
Nursing Education	120	6.37	6.35
Non-Nursing Education	14	0.42	2.47
Nursing Service	103	3.78	4.71
Other	14	0.35	1.66

**TABLE 3**  
**THE ACADEMIC NURSE ADMINISTRATOR SUPPORT EXPERIENCES**

Variables	n	Percentage
<i>Support Person(s)</i>		
Parents	8	15.2
Spouse	21	13.5
Mentor/Role Model	52	33.5
Peers/Colleagues in Nursing	96	61.9
Peers/Colleagues in		
Non-Nursing	25	16.1
Other	29	18.7
<i>Supportive Experiences</i>		
Internship	31	20.0
Mentoring	69	44.5
Continuing Education	53	34.2
Workshops/Seminars	68	43.9
Other	10	6.5
None	23	14.8

major experience gained prior to their existing position. A total of 120 (77.9%) who responded to nursing education had 6.37 years of experience and specified they worked in this capacity as faculty, director, program, or course coordinator. Nursing service was next, with 103 (66.9%) who identified they worked as vice president of nursing service, director or clinical nurse specialist, nurse practitioner, staff nurse, charge nurse, or nursing supervisor. The average number of years worked in nursing service prior to their existing position was 3.7 years. Over 66% responded favorably to nursing education and nursing service as areas worked in to gain administrative experiences prior to their existing position. A small number of administrators who responded to "other" wrote subjective statements indicating they were asked to assume this position.

#### **Support Person(s)**

In addition to prior administrative experiences, the academic nurse administrators identified support person(s) who encouraged them to enter academic administration. Most administrators (61.9%) were encouraged by peers and colleagues in nursing, followed by 33.5% who had encouragement from a mentor/role model. Peers/colleagues who were not nurses, parents, or spouses were also considered by the administrators as having encouraged them to enter into their current position.

### **Supportive Experiences**

Mentoring was cited by 69 (44.5%) of the administrators as a supportive experience that prepared them for their role. Workshops and seminars were also favorable (43.9%). Fifty-three (34.2%) identified continuing education, and 10 (6.5%) specified internship as supportive experiences. Some of the administrators who chose to answer the category "other" specified self-preparation as a supportive and related experience.

### **Mentoring Experiences**

Table 4 shows the distribution of settings where mentoring experiences occurred. Educational setting may include student assignment when actively enrolled in a course of study. Work setting may include an academic or clinical setting. Professional setting may include an academic setting in higher education and mixed/other setting may include a combination of all settings. A majority of the academic nurse administrators, 52 (46.4%), reported their mentoring experiences in educational settings. Thirty-five (31.3%) were mentored in their work environment, 10 (8.9%) in professional settings, and 15 (13.4%) in mixed settings.

Table 5 shows the description of the special person(s) who served as the most significant mentor for administrators. Thirty-three percent of the administrators indicated that a "supervisor" was that special person who



**TABLE 4**  
**SETTINGS MENTORING EXPERIENCES MOST USUALLY OCCURRING**  
**FOR ADMINISTRATORS**

Settings	n	Percentage
Educational	52	46.4
Work	35	31.2
Professional	10	8.9
Mixed/Other	15	13.4

**TABLE 5**  
**DESCRIPTION OF THE SPECIAL PERSON WHO SERVED AS THE MOST**  
**SIGNIFICANT MENTOR FOR ADMINISTRATORS**

Person(s)	n	Percentage
Teacher/Instructor	26	23.2
Relative	4	3.6
Supervisor	37	33.0
Friend	16	14.3
Peer	32	28.6
Spouse	4	3.6
Counselor	1	0.9
Other	6	5.4

served as their most significant mentor. "Peer, teacher/instructor" were also considered significant persons. One-hundred and twelve (72.3%) administrators indicated that they did have a special person in their career development who was their mentor. Of this group, 2 (1.20%) reported having five to six mentors, 51 (45.5%) had two to three mentors, and almost half, 46 (41.1%), reported having one mentor.

The length of time the mentor-protégé relationship lasted with the most significant mentor spanned from 1-25 years, with a mean of 5.68 years and a standard deviation of 6.34. Table 6 shows length in years for the mentor-protégé relationship with the most significant mentor. Half of the administrators who were mentored 51 (45.5%) had a 1-5 year(s) mentor-protégé relationship, and 32 (28.6%) identified 6-10 years. One administrator indicated the relationship lasted 25 years.

Respondents who did not have a mentor were asked to specify if it would have made a difference in their career progress if they had had a mentor. More than half indicated that a mentor would have made a difference. Eighty-six percent of those who stated that mentoring would make a difference in one's career progress also indicated that they would recommend a mentoring relationship for prospective academic nurse administrators.

In the overall demographics, the majority of the academic nurse administrators were female with about 1-5 year(s) administrative experience, and most had been full-time faculty members prior to their administrative role. The title commonly used by the administrators was dean or acting dean, and from the total group approximately 78% held doctoral degrees.

**TABLE 6**  
**LENGTH IN YEARS FOR MENTOR-PROTÉGÉ RELATIONSHIP**  
**WITH MOST SIGNIFICANT MENTOR**

Mentor-Protégé Relationship Years	n	Percentage
1-5	51	45.5
6-10	32	28.6
11-15	9	8.0
16-20	16	14.3
Over 21	1	0.9

Nursing education was the major experience gained prior to their existing position, along with experiences in clinical settings. Most administrators were encouraged by peers and colleagues in nursing as support persons to enter into their administrative position. Additional support came from mentors who gave the administrators experience and support. The mentoring experiences occurred in several settings which included: educational, work, professional, and mixed. Administrators reported having at least one

mentor with a 1-5 year(s) relationship, and more than half (86.5%) indicated that a mentor would make a difference in their career progress.

### **Characteristics of the Mentor-Protégé Relationship**

#### **Research Question 1**

Research question 1 asked: What were the defining characteristics of the mentor-protégé relationship among academic nurse administrators?

Table 7 shows the mean and standard deviation for each measure of the mentor-protégé relationship among academic nurse administrators. Table 28 in Appendix C shows the percentages of responses for each item given the scale employed from 1 for "strongly disagree"; 2 "disagree"; 3 "not sure"; 4 "agree"; and 5 "strongly agree." The results in Table 7 indicate that the mentor-protégé relationship was positive. These relationships were supportive, intellectually stimulating, encouraged independent growth, assisted the nurse administrators toward their responsibilities, and encouraged risk-taking and further education. Approximately one-fourth (27.7%) of the respondents thought their relationship with their mentors was competitive, and less than one-fifth (17.8%) agreed that it was controlling. Less than 10% viewed this relationship as anxiety-producing or limiting in their career progress.

**TABLE 7**  
**CHARACTERISTICS OF MENTOR-PROTÉGÉ RELATIONSHIP**

The Mentor Relationship Characteristics (n = 112)	Mean	SD
Supportive	4.69	0.58
Intellectually stimulating	4.42	0.80
Assisted me towards my present career responsibilities	4.30	0.93
Encouraged independent growth	4.27	0.85
Fostered exploration of ideas	4.18	0.91
Promoted decision-making in testing of ideas	4.16	0.92
Encouraged further education	4.16	1.07
Encouraged risk-taking	4.03	1.01
Stimulated interest in research	3.68	1.11
Competitive	2.41	1.38
Controlling	2.03	1.23
Anxiety-producing and non-productive	1.49	0.98
Limited my career progress	1.33	0.75

Table 8 shows Pearson's correlation coefficient between the length of the mentor-protégé relationship and the defining characteristics of that relationship.

The correlation coefficient showed no significance at the 0.05 level, suggesting that the length of time of the mentor-protégé relationship did not have a significant bearing on the characteristics or nature of that relationship.

TABLE 8

**PEARSON'S CORRELATION COEFFICIENTS BETWEEN MENTOR-PROTÉGÉ  
RELATIONSHIP AND LENGTH OF RELATIONSHIP**

Variables (n = 112)	r	Probability
Supportive	0.083	0.382
Intellectually stimulating	0.184	0.052
Limited career progress	-0.168	0.076
Encouraged independent growth	0.031	0.742
Anxiety-producing and non-productive	-0.009	0.925
Promoted decision-making/ testing of ideas	0.114	0.233
Competitive	0.087	0.359
Fostered exploration of ideas	0.115	0.225
Controlling	-0.105	0.271
Encouraged risk-taking	0.144	0.130
Stimulated interest in research	0.143	0.132
Encouraged further education	0.102	0.283
Assisted towards present career responsibilities	0.093	0.332

Table 9 shows t-test results accompanying the mean ratings of nurse administrators with nurse mentors and those with non-nurse mentors. Significant differences in group means were found for "competitive." Administrators whose mentors were non-nurses felt that their mentor-protégé relationship was more competitive than administrators with nurse mentors. No other characteristics significantly differentiated the groups.

Table 10 shows the mean and standard deviation for each measure of the mentor-protégé relationship for four different settings under which mentoring occurred: educational, work, professional, and mixed. All F values

**TABLE 9**  
**t-TEST COMPARISON OF MENTOR CHARACTERISTICS FOR A NURSE**  
**AND A NON-NURSE MENTOR**

Variables/The Mentor Relationship	Nurse (n = 90)		Non-Nurse (n = 22)		t	DF	Prob
	Mean	SD	Mean	SD			
Was supportive	4.68	0.49	4.68	0.89	-0.02	24.2 <sup>a</sup>	0.98
Was intellectually stimulating	4.41	0.75	4.50	1.01	-0.46	110	0.64
Limited my career progress	1.36	0.72	1.27	0.88	0.46	110	0.66
Encouraged independent growth	4.23	0.84	4.45	0.91	-1.09	110	0.28
Was anxiety-producing and non-productive	1.49	0.94	1.50	1.18	-0.04	110	0.96
Promoted decision-making and testing of ideas	4.12	0.92	4.36	0.95	-1.09	110	0.28
Competitive	2.27	1.29	3.00	1.60	-2.27	110	0.03*
Fostered exploration of ideas	4.12	0.89	4.45	0.96	-1.54	110	0.13
Controlling	2.10	1.26	1.77	1.11	1.11	110	0.27
Encouraged risk-taking	3.98	1.03	4.27	0.88	-1.22	110	0.22
Stimulated interest in research	3.73	1.13	3.50	1.06	0.88	110	0.38
Encouraged further education	4.14	1.11	4.23	0.92	-0.32	110	0.75
Assisted towards present career responsibilities	4.27	0.96	4.45	0.86	-0.84	110	0.40

<sup>a</sup>Due to unequal group variances.

\*p < 0.05.

**TABLE 10**  
**ANOVA COMPARISON OF PAST MENTOR-PROTÉGÉ RELATIONSHIP CHARACTERISTICS**  
**FOR FOUR MENTORING SETTINGS**

Variables	Educational (n = 52)		Work (n = 35)		Professional (n = 10)		Mixed/Other (n = 15)		F <sup>a</sup>	Prob
	M	SD	M	SD	M	SD	M	SD		
Supportive	4.68	0.52	4.68	0.76	4.60	0.52	4.73	0.46	0.10	0.96
Intellectually stimulating	4.18	0.84	4.00	0.98	3.50	1.44	4.67	0.62	0.75	0.52
Limited career progress	3.74	1.06	3.48	1.22	3.80	1.22	1.27	0.46	1.17	0.32
Encouraged independent growth	4.20	0.96	4.12	1.28	4.00	1.24	4.47	0.64	0.50	0.68
Anxiety-producing & non-productive	4.20	0.98	4.48	0.88	3.90	1.20	1.93	1.33	2.54	0.06
Promoted decision-making/testing of ideas	4.36	0.82	4.38	0.92	4.60	0.52	4.13	0.99	0.47	0.70
Competitive	1.32	0.78	1.48	0.88	1.00	0.00	2.53	1.41	0.55	0.65
Fostered exploration of ideas	4.30	0.70	4.20	1.02	4.10	1.20	4.40	1.06	0.46	0.71
Controlling	1.34	0.76	1.38	0.80	2.00	1.64	2.07	1.16	1.72	0.17
Encouraged risk-taking	4.16	0.84	4.28	0.98	3.90	1.10	4.00	1.31	1.28	0.28
Stimulated interest in research	2.30	1.24	2.38	1.52	2.90	1.66	3.93	1.03	0.68	0.57
Encouraged further education	4.10	0.86	4.22	0.84	4.20	1.22	4.27	0.88	0.16	0.92
Assisted towards career responsibilities	1.76	1.06	2.32	1.34	2.40	1.64	4.53	0.64	1.63	0.19

<sup>a</sup>df = (3,108).



were not statistically significant at the 0.05 level, suggesting that the quality or characteristics of the mentor-protégé relationship was unrelated to the settings under which it took place.

#### **Status of Present Relationship With Mentor**

The status of the respondents' relationship with their mentor at the time they answered the questionnaire is shown in Table 11.

Approximately 70% had become "peers/colleagues" to their mentors. Half considered their mentors as "close friends."

**TABLE 11**

#### **CURRENT RELATIONSHIP WITH MOST SIGNIFICANT MENTOR (*n* = 122)**

Rank Response to "Yes"	<i>n</i>	Percentage
<i>Relationship Variables</i>		
Peer/Colleague	76	67.9
Close friends	57	51.4
Have frequent contacts	48	42.9
Modest friendship	46	41.1
Mentor is deceased	21	18.8
Lost contact with mentor	18	16.1
Professional associate only	16	14.3
Negative relationship	10	8.9
Competitive relationship	9	8.0
Other	7	6.2

About (43%) had frequent contacts with their mentors and considered their friendship modest. Nineteen percent had mentors who were deceased, and 16% had lost contact with mentors. Less than 10% indicated they had a competitive or negative relationship with their mentors.

Table 12 shows the correlation between the status of the existing relationship and the length of the mentor-protégé relationship. The correlation coefficients were not significant at the 0.05 level, suggesting that the length of the mentor-protégé relationship was unrelated to the status of their existing relationship.

Table 13 shows the existing status of the mentor-protégé relationship between administrators with nurse and non-nurse mentors. A significant difference between the two groups was found for "close friends." More administrators whose mentors were nurses considered their mentors as "close friends" than administrators with non-nurse mentors. Administrators with non-nurse mentors felt the relationship was somewhat more "competitive" than those with nurse mentors. The subjective responses to "other" included terms that described the relationship as trusting, confidence building, more than friends, and a positive role model. The mean differences among the two types of mentors were not large in several of the other variables.

**TABLE 12**  
**PEARSON'S CORRELATION COEFFICIENT BETWEEN THE STATUS OF**  
**EXISTING RELATIONSHIP AND LENGTH OF MENTOR-PROTÉGÉ**  
**RELATIONSHIP**

Variable	$r$	Probability
Close friends	-0.184	0.053
Peer/Colleague	-0.045	0.633
Modest friendship	0.175	0.065
Lost contact with mentor	0.175	0.065
Mentor is deceased	0.057	0.553
Have frequent contacts	-0.009	0.927
Competitive relationship	0.082	0.393
Professional associate only	0.061	0.529
Negative relationship	0.066	0.493
Other	0.118	0.216

TABLE 13  
COMPARISON OF MENTOR CHARACTERISTICS FOR A NURSE AND NON-NURSE MENTOR

Variable/The mentor relationship (existing)	Nurse (n = 90)	Non-nurse (n = 22)	$\chi^2$	Prob
	Percentage of "Yes"	Percentage of "Yes"		
Close friends	57.30	31.82	4.592	0.032*
Peer/Colleague	67.78	72.73	0.202	0.653
Modest friendship	38.89	54.55	1.779	0.182
Have lost contact with mentor	15.56	22.73	0.645	0.422
Mentor is deceased	17.86	9.09	1.931	0.165
Have frequent contacts	43.33	45.45	0.032	0.857
Competitive relationship	11.11	0.00	2.684	0.101
Professional associate only	15.56	13.64	0.051	0.822
Negative relationship	11.11	4.55	0.860	0.354
Other	8.89	0.00	2.106	0.147

<sup>a</sup>Due to unequal group variances.

\*p < 0.05.

Table 14 shows the mean and standard deviation for each measure of the present mentor-protégé relationship for four settings--education, work, professional, and mixed. All *F* values were not statistically significant at the 0.05 level, suggesting that the quality or characteristics of the present relationship was unrelated to the settings under which the mentor-protégé relationships took place.

### **Functions and Activities of Mentors**

#### **Research Question 2**

What academic functions and activities did mentored academic nurse administrators engage in most frequently with mentors?

Table 15 shows the means and standard deviations for functions carried out during the mentor-protégé relationship.

Table 29 in Appendix C shows the percentages of responses for each item given the scale employed from 1 "never"; 2 "seldom"; 3 "occasionally"; 4 "often"; and 5 "very frequently." Functions with means of 4.00 and higher were used as a basis for deciding the importance of functions carried out most often by the mentor. A total of 7 of the 22 functions had means ranging from 4.04 to 4.50. Administrators indicated that throughout the mentor relationship, the mentor served as a positive role model, encouraged their intellectual development and encouraged

**TABLE 14**  
**ANOVA RESULTS OF MENTOR-PROTÉGÉ RELATIONSHIP CHARACTERISTICS FOR**  
**FOUR MENTORING SETTINGS**

Variables	Education (n = 52)		Work (n = 35)		Professional (n = 10)		Mixed/Other (n = 15)		F <sup>a</sup>	DF	Prob
	M	SD	M	SD	M	SD	M	SD			
Close friends	1.45	0.58	1.63	0.49	1.30	0.48	1.33	0.49	1.72	3,107	0.17
Peer/colleagues	1.30	0.51	1.34	0.48	1.20	0.42	1.27	0.46	0.26	3,108	0.86
Modest friendship	1.58	0.54	1.48	0.50	1.50	0.53	1.80	0.41	1.39	3,108	0.25
Have lost contact											
with mentor	1.77	0.47	1.91	0.28	1.70	0.48	1.87	0.35	1.26	3,108	0.29
Mentor is decreased	1.77	0.47	1.82	0.38	1.70	0.48	1.87	0.35	0.43	3,108	0.73
Have frequent contacts	1.50	0.54	1.68	0.47	1.70	0.48	1.33	0.48	2.19	3,108	0.09
Competitive											
relationship	1.90	0.36	1.94	0.23	1.80	0.42	1.87	0.35	0.56	3,108	0.65
Professional											
associate only	1.80	0.44	1.88	0.32	1.60	0.52	2.00	0.00	2.44	3,108	0.06
Negative relationship	1.87	0.39	1.94	0.23	1.70	0.48	2.00	0.00	2.01	3,108	0.12
Other	1.90	0.36	1.94	0.23	1.80	0.42	2.00	0.00	0.98	3,108	0.41

<sup>a</sup>Due to unequal group variances.

**TABLE 15**  
**MEANS AND STANDARD DEVIATIONS FOR FUNCTIONS CARRIED**  
**OUT IN THE MENTOR-PROTÉGÉ RELATIONSHIP**

Variables (n = 112)	Mean	SD
Served as a positive role model	4.50	0.63
Encouraged intellectual development	4.31	0.74
Encouraged to believe in myself	4.30	0.86
Provided for two-way exchange of ideas	4.30	0.75
Encouraged to think for myself	4.27	0.80
Introduced to important others	4.11	1.01
Gave advice in dealing with specific situation and problem-solving	4.04	1.04
Encouraged decisiveness	3.99	0.94
Included in work to provide guided experience	3.99	1.02
Identified helpful contacts for assistance or information	3.96	1.09
Stimulated to pursue further education	3.96	1.21
Wrote letters of reference	3.89	1.35
Constructively critiqued my work	3.88	1.14
Involved in his/her professional contacts	3.82	1.14
Taught me new skills	3.74	1.00
Encouraged to create my own space	3.71	1.24
Provided career counseling	3.68	1.16
Encouraged to write and publish ideas	3.46	1.29
Assisted in identifying financial support and/or grant writing	3.18	1.36
Guided in clinical activities	2.75	1.46

them to believe in themselves. The relationship also provided for a two-way exchange of ideas and encouraged the protégés to think for themselves. The mentor also introduced the protégé to important others, and gave advice in dealing with specific situations and problem-solving.

Functions carried out less frequently during the mentor-protégé relationship included the following: the mentor (1) encouraged decisiveness, (2) constructively critiqued the protégé's work, and (3) included the protégé in his/her work to provide guided experiences. Protégés were assisted in identifying helpful and professional contacts for assistance or information. Letters of reference were occasionally written for the protégé, and sometimes they were stimulated to pursue further education.

In addition, functions not carried out as "often" included: "being taught new skills," "encouragement to create own space," "providing career counseling and personal counselling," "encouraging protégé to write and publish ideas," "encouraging protégé to become involved in research," "assisting protégé in identifying financial support, and/or grant writing" and "guidance in clinical activities."

Table 16 shows the means and standard deviations for activities the mentor involved the protégé in during the mentoring relationship. Table 30 in Appendix C shows the



**TABLE 16**  
**MEANS AND STANDARD DEVIATIONS FOR ACTIVITIES CARRIED OUT**  
**IN THE MENTOR-PROTÉGÉ RELATIONSHIP**

Variables (n = 112)	Mean	SD
Curriculum issues	3.88	1.21
Problem analysis	3.87	1.09
Faculty evaluation	3.67	1.28
Functioning in an administrative position	3.65	1.36
Teaching	3.43	1.44
Consulting	3.12	1.37
Planning research	2.90	1.23
Writing a book/article	2.86	1.36
Developing research design	2.84	1.27
Carrying out research projects	2.80	1.35
Writing grant proposals	2.80	1.41
Developing research data-collection instruments	2.74	1.31
Conducting research	2.74	1.35
Presenting a research paper	2.71	1.41
Writing a research paper	2.68	1.33
Reviewing research proposals	2.56	1.41

percentages of responses for each item given the scale employed for 1 "never"; 2 "seldom"; 3 "occasionally"; 4 "often"; and 5 "very frequently." As shown in Table 16, means ranged from 2.56 to 3.88 indicating that all the activities listed were carried out to some extent by the mentors.

None of the means are above 4.00, indicating that the administrators felt they were not assisted "often" in any of these activities. Administrators indicated they were assisted occasionally with problem analysis and curriculum issues, teaching, functioning in an administrative position, consulting, and participation in faculty evaluation.

Activities that occurred less frequently throughout the relationship included several areas on research such as planning research design and data-collection instruments, carrying out and conducting a research project, writing a research paper or book/article, and reviewing research proposals. Administrators indicated they were seldom assisted in other activities such as presenting a research paper or writing grant proposals.

Pearson's correlation coefficient between activities and functions and the length of mentor-protégé relationship was computed and is shown in Tables 17 and 18. Most of these correlations are low.

**TABLE 17**  
**PEARSON'S CORRELATION COEFFICIENT BETWEEN**  
**FUNCTIONS IN THE MENTOR-PROTÉGÉ RELATIONSHIP**  
**AND LENGTH OF RELATIONSHIP**

Variable (n = 112)	r	Probability
Taught new skills	0.265	0.0048**
Encouraged intellectual development	0.252	0.0073**
Introduced to important others	0.264	0.0050**
Guided in clinical activities	0.183	0.0540
Encouraged decisiveness	0.315	0.0007***
Served as a positive role model	0.081	0.3961
Provided personal counseling	0.193	0.0414*
Encouraged to think for myself	0.183	0.0532
Provided career counseling	0.213	0.0243*
Encouraged to create my own space	0.160	0.0914
Identified helpful contacts for assistance	0.218	0.0210*
Encouraged to believe in myself	0.293	0.0017**
Included in work	0.255	0.0067**
Provided for two-way exchange of ideas	0.183	0.0540
Encouraged to write and publish my ideas	0.317	0.0007***
Stimulated to pursue further education	0.183	0.0534
Encouraged to become involved in research	0.243	0.0097**
Involved in professional contacts	0.230	0.0151*
Assisted in identifying financial support & grant writing	0.164	0.0832
Constructively critiqued work	0.212	0.0249*
Problem-solving	0.098	0.3024
Wrote letters of reference	0.117	0.2181

\*p &lt; 0.05.

\*\*p &lt; 0.01.

\*\*\*p &lt; 0.001.

**TABLE 18**  
**PEARSON'S CORRELATION COEFFICIENT BETWEEN**  
**ACTIVITIES IN THE MENTOR-PROTÉGÉ RELATIONSHIP**  
**AND LENGTH OF RELATIONSHIP**

Variable (n = 112)	r	Probability
Teaching	0.130	0.1705
Functioning in an administrative position	-0.051	0.5950
Planning research	0.285	0.0024**
Developing research design	0.243	0.0100**
Developing research data-collection instruments	0.281	0.0027**
Conducting research	0.295	0.0016**
Writing a book/article	0.347	0.0002***
Problem analysis	0.247	0.0087**
Carrying out research projects	0.346	0.0002***
Writing a research paper	0.311	0.0009***
Presenting a research paper	0.304	0.0011**
Consulting	0.272	0.0037**
Writing grant proposals	0.267	0.0045**
Reviewing research proposals	0.246	0.0088**
Curriculum issues	0.153	0.1060
Faculty evaluation	0.161	0.0893

\*p &lt; 0.05.

\*\*p &lt; 0.01.

\*\*\*p &lt; 0.001.

As shown in Table 17, the length of the mentoring relationship was significantly related to most of the functions.

Several functions were significantly related to the length of the mentoring relationship at the 0.05 level of significance. The longer the mentor-protégé relationship, the more likely the mentor provided personal and career counseling, identified helpful contacts for assistance or information, involved the protégé with professional contracts, and constructively critiqued their work.

At the 0.01 level of significance, several functions were significantly related to the length of the mentoring relationship and included: "the mentor taught new skills," "encouraged intellectual development," "introduced the administrator to important others," "encouraged them to believe in themselves," "included the administrator in his/her work to provide guided experience," and "gave encouragement to become involved in research."

At the 0.001 level of significance two functions were significantly related to the length of the relationship: the mentor encouraged decisiveness and encouraged the administrator to write and publish his/her ideas.

As shown in Table 18, the length of the mentoring relationship was significantly related to several activities as identified by administrators. At  $p = 0.01$  level, the

length of the mentoring relationship was significantly related to the following activities: "planning and conducting research," "developing research design," "developing research data collection," "presenting a research paper," "writing grant proposals and reviewing research proposals," and "problem analysis and consulting."

At  $p = 0.001$  level, three items were significant and included: "writing a book/article," "carrying out research projects," and "writing a research paper."

A  $t$ -test comparison of mentor functions and activities for a nurse and a non-nurse mentor is shown in Tables 19 and 20. Table 19 shows mean scores for each mentor function for a nurse and a non-nurse mentor.

At  $p = 0.05$  level, four areas showed a significant difference between the mentored types. Administrators felt they were guided more in clinical activities by mentors who were nurses compared to non-nurse mentors. More administrators felt that nurse mentors provided a two-way exchange of ideas than did non-nurse mentors. In the area of "encouraged to write and publish ideas" ( $t = 2.192$ ,  $p = 0.04$ ), administrators felt that nurse mentors were more likely to encourage them to write and publish their ideas than were non-nurse mentors. More administrators felt that nurse mentors wrote letters of reference than did the non-nurse mentors. No other activity showed a significant difference between administrators who had nurse mentors and non-nurse mentors.

TABLE 19

**t-TEST COMPARISON OF MENTOR FUNCTIONS FOR A NURSE AND A NON-NURSE MENTOR**

Variables/Mentor Functions	Nurse (n = 90)		Non-Nurse (n = 22)		t	DF	Prob
	Mean	SD	Mean	SD			
Taught new skills	3.73	1.00	3.77	1.02	-0.164	110	0.87
Encouraged intellectual development	4.34	0.66	4.18	1.05	0.692	25.1 <sup>a</sup>	0.50
Introduced to important others	4.12	0.96	4.10	1.23	0.129	110	0.90
Guided me in clinical activities	2.90	1.45	2.14	1.36	2.236	110	0.03*
Encouraged decisiveness	3.93	0.96	4.23	0.87	-1.313	110	0.19
Served as a positive role model	4.47	0.62	4.68	0.64	-1.444	110	0.15
Provided personal counseling	3.44	1.28	3.50	1.33	-0.181	110	0.86
Encouraged to think for myself	4.27	0.82	4.27	0.70	-0.032	110	0.97
Provided career counseling	3.68	1.13	3.68	1.32	-0.014	110	0.99
Encouraged to create my own space	3.72	1.21	3.64	1.40	0.289	110	0.77
Identified helpful contacts for assistance	3.96	1.21	3.96	1.00	0.004	110	0.99
Encouraged to believe in myself	4.23	0.87	4.55	0.74	-1.543	110	0.13
Included in work	4.03	0.99	3.82	1.14	0.887	110	0.37
Provided for two-way exchange of ideas	4.38	0.70	4.00	0.87	2.167	110	0.03*
Encouraged to write and publish ideas	3.71	1.22	3.06	1.29	2.268	110	0.03*
Stimulated to pursue further education	4.03	1.20	3.68	1.21	1.226	110	0.22
Encouraged to become involved in research	3.62	1.23	3.05	1.46	1.895	110	0.06
Involved in professional contacts	3.92	1.09	3.41	1.26	1.914	110	0.06
Assisted with financial support & grant writing	3.23	1.37	2.95	1.33	0.862	110	0.39
Constructively critiqued work	3.92	1.10	3.73	1.28	0.719	110	0.47
Problem-solving	4.04	1.00	4.05	1.21	-0.004	110	0.99
Wrote letters of reference	4.02	1.25	3.36	1.62	2.079	110	0.04*

<sup>a</sup>Due to unequal group variances.

\*p &lt; 0.05.

TABLE 20

## t-TEST COMPARISON OF MENTOR ACTIVITIES FOR A NURSE AND A NON-NURSE MENTOR

Variable/Mentor Activities	Nurse (n = 90)		Non-Nurse (n = 22)		t <sup>a</sup>	Prob
	Mean	SD	Mean	SD		
Teaching	3.57	1.39	2.86	1.55	2.078	0.04*
Functioning in an administrative position	3.58	1.33	3.95	1.46	-1.166	0.25
Planning research	2.97	1.21	2.64	1.29	1.131	0.26
Developing research design	2.90	1.25	2.59	1.33	1.023	0.31
Developing research data collection instruments	2.81	1.29	2.45	1.37	1.149	0.25
Conducting research	2.82	1.35	2.41	1.37	1.287	0.20
Writing a book/article	2.97	1.37	2.41	1.26	1.738	0.09
Problem analysis	3.83	1.07	4.00	1.15	-0.643	0.52
Carrying out research projects	2.89	1.36	2.41	1.26	1.502	0.14
Writing a research paper	2.79	1.34	2.23	1.19	1.793	0.08
Presenting a research paper	2.78	1.46	2.45	1.18	0.963	0.34
Consulting	3.19	1.36	2.82	1.40	1.136	0.26
Writing grant proposals	2.88	1.41	2.50	1.37	1.131	0.26
Reviewing research proposals	2.70	1.43	2.00	1.19	2.126	0.03*
Curriculum issues	4.00	1.61	3.36	1.29	2.253	0.03*
Faculty evaluation	3.77	1.25	3.27	1.35	1.630	0.11

<sup>a</sup>df = 110.

\*p < 0.05.



Table 20 shows the  $t$ -test comparison of mentor activities for a nurse and non-nurse mentor. At the 0.05 level, significant differences between the two groups were found for three activities. Administrators with nurse mentors participated more often in "teaching," "curriculum issues," and "reviewing research proposals" than did administrators with non-nurse mentors. Administrators with nurse mentors tended to be more frequently involved in many of the other activities than did administrators with non-nurse mentors. However, the differences were not statistically significant at the 0.05 level.

#### **Functions and Activities in Four Mentoring Settings**

Table 21 shows the ANOVA results for comparing mentor-protégé functions for four mentoring settings: education, work, professional, and mixed. Applying an alpha level of  $p = 0.05$ , significant differences were found in several of the functions among the settings. The Student-Neuman-Keuls (SNK), a Post Hoc Multiple Comparison Procedure, was employed to identify group mean differences among the four mentoring settings.

In being "taught new skills" ( $F = 4.35$ ,  $p = 0.006$ ), administrators were taught more "new skills" in professional settings (mean = 4.30) and mixed settings (mean = 4.27) than in educational and work settings. There were also group

**TABLE 21**  
**ANOVA RESULTS FOR FUNCTIONS UNDER FOUR MENTORING SETTINGS**

Variables	Educational (n = 52)		Work (n = 35)		Professional (n = 10)		Mixed/Other (n = 15)		F <sup>a</sup>	Prob
	Mean	SD	Mean	SD	Mean	SD	Mean	SD		
Taught new skills	3.44	0.98	3.80	0.96	4.30	1.06	4.27	0.80	4.35	0.006*
Encouraged intellectual development	4.21	0.85	4.37	0.65	4.60	0.52	4.33	0.72	0.88	0.452
Introduced to important others	3.83	1.33	4.31	0.90	4.40	0.84	4.47	0.64	2.87	0.039*
Guided in clinical activities	2.81	1.33	2.40	1.46	3.70	1.50	2.73	1.71	2.17	0.095
Encouraged decisiveness	3.75	0.97	4.17	0.92	4.50	0.71	4.07	0.89	2.67	0.051
Served as a positive role model	4.40	0.72	4.60	0.50	4.70	0.48	4.53	0.64	1.04	0.377
Provided personal counseling	3.25	1.20	3.31	1.41	4.30	1.06	3.93	1.16	2.84	0.041*
Encouraged to think for myself	4.17	0.81	4.31	0.87	4.60	0.52	4.27	0.70	0.87	0.461
Provided career counseling	3.44	1.12	3.74	1.19	4.50	0.53	3.80	1.32	2.57	0.058
Encouraged me to create own space	3.40	1.27	3.74	1.24	4.70	0.48	4.00	1.13	3.70	0.014*
Identified helpful contacts for assistance	3.67	1.25	4.20	0.96	4.40	0.69	4.07	0.80	2.43	0.069
Encouraged to believe in myself	4.12	0.86	4.49	0.85	4.40	0.97	4.40	0.74	1.49	0.222
Included in work	3.75	1.10	4.00	1.00	4.60	0.52	4.40	0.74	3.15	0.028*
Provided for two-way exchange of ideas	4.19	0.89	4.31	0.63	4.70	0.48	4.40	0.51	1.43	0.238
Encouraged to write and publish ideas	3.52	1.23	3.43	1.46	4.30	0.82	3.67	0.96	1.34	0.265
Stimulated to pursue further education	3.94	1.21	3.66	1.41	4.60	0.70	4.33	0.62	2.22	0.090
Encouraged to become involved in research	3.33	1.20	3.40	1.46	4.50	0.71	3.73	1.28	2.64	0.530
Involved in professional contacts	3.60	1.26	3.80	1.08	4.60	0.70	4.13	0.83	2.73	0.048*
Assisted with financial support & grant writing	2.81	1.39	3.43	1.24	4.10	1.10	3.27	1.33	3.46	0.019*
Constructively critiqued work	3.75	1.53	3.80	1.21	4.70	0.48	4.00	1.07	2.14	0.100
Problem-solving	3.79	1.11	4.11	1.11	4.60	0.52	4.40	0.63	2.75	0.047*
Wrote letters of reference	3.87	1.28	3.71	1.56	4.10	1.29	4.27	1.16	0.67	0.575

<sup>a</sup>df = (3,108).  
\*p < 0.05.

differences for "introduced me to important others" ( $F = 2.87, p = 0.039$ ). For this function, administrators were introduced more often to important others in the work, professional, and mixed settings than in an educational setting. Regarding "provided personal counseling" ( $F = 2.84, p = 0.041$ ), administrators had more exposure to personal counseling in a professional setting than in either an education, work, or mixed settings. Regarding "encouraged me to create my own space" ( $F = 3.70, p = 0.014$ ), administrators indicated that in professional settings they were more frequently encouraged to create their own space than in an education, work, or mixed setting. Being "included in the mentor's work to provide guided experience" ( $F = 3.15, p = 0.028$ ) in three settings--work, professional, and mixed--administrators indicated they carried out this function more often in one of these settings than in educational settings. Regarding "involved in professional contacts" ( $F = 2.73, p = 0.048$ ), administrators received more exposure to professional contacts in professional and mixed settings than in educational or work. Regarding "assisted with financial support and grant writing" ( $F = 3.46, p = 0.019$ ), administrators were assisted more often in the professional setting to accomplish this function. Regarding "gave advice in dealing with specific situations and problem-solving" ( $F = 2.75, p = 0.047$ ), administrators indicated that in

professional settings they were more encouraged to become involved in research, followed by mixed settings and work settings. In educational settings, they were occasionally involved in research. In general, the nurse administrators were more frequently involved in various functions under a professional setting than in other settings.

Table 22 shows the ANOVA results for comparing mentor-protégé activities for the four mentoring settings. Applying an alpha level of  $p = 0.05$ , several areas showed a significant difference among the mentoring settings. The SNK was employed to identify group mean differences among the four mentoring settings.

In the activity of "functioning in an administrative position" ( $F = 4.22$ ,  $p = 0.007$ ), it was found that administrators were more involved in "functioning in an administrative position" as an activity in work and mixed settings than in any of the others. In "writing a research paper" ( $F = 5.29$ ,  $p = 0.002$ ), most administrators indicated that in a professional setting they were more involved in "writing a research paper" than in education, work, or mixed settings. In "presenting a research paper" ( $F = 6.46$ ,  $p = 0.001$ ), administrators identified more positively to the professional setting where they presented a research paper more than in an educational, work, or mixed settings. Research papers were presented in these settings, but a clear distinction could not be found. In the area of

TABLE 22  
ANOVA RESULTS FOR ACTIVITIES UNDER FOUR MENTORING SETTINGS

Variables	Educational (n = 52)		Work (n = 35)		Professional (n = 10)		Mixed/Other (n = 15)		F <sup>a</sup>	Prob
	Mean	SD	Mean	SD	Mean	SD	Mean	SD		
Teaching	3.60	1.33	3.11	1.55	3.10	1.85	3.80	1.21	1.30	0.279
Functioning in an administrative position	3.25	1.40	4.14	1.17	3.30	1.70	4.13	0.92	4.22	0.007*
Planning research	2.75	1.12	2.77	1.39	4.00	1.33	3.00	0.76	3.27	0.024*
Developing research design	2.70	1.11	2.71	1.36	3.80	1.62	3.00	1.13	2.42	0.070
Developing research data- collection instruments	2.60	1.12	2.60	1.46	3.90	1.45	2.80	1.46	3.16	0.028*
Conducting research	2.67	1.22	2.57	1.42	4.00	1.33	2.53	1.36	3.44	0.020*
Writing a book/article	2.71	1.93	2.63	1.44	3.90	1.45	3.20	1.42	2.95	0.036*
Problem analysis	3.54	0.99	4.00	1.16	4.30	1.25	4.40	0.74	3.75	0.013*
Carrying out research projects	2.71	1.78	2.51	1.48	3.90	1.45	3.00	1.25	3.08	0.030*
Writing a research paper	2.44	1.07	2.46	1.46	4.00	1.33	3.13	1.30	5.29	0.002*
Presenting a research paper	2.50	1.21	2.40	1.51	4.30	0.82	3.13	1.41	6.46	0.001*
Consulting	2.83	1.35	2.89	1.37	4.10	1.29	4.00	0.85	5.46	0.001*
Writing grant proposals	2.54	1.31	2.94	1.47	3.90	1.60	2.67	1.18	2.95	0.036*
Reviewing research proposals	2.44	1.27	2.46	1.50	3.70	1.70	2.47	1.19	2.49	0.064
Curriculum issues	3.92	1.15	3.63	1.40	4.10	1.20	4.13	0.92	0.85	0.468
Faculty evaluation	3.58	1.26	3.49	1.42	3.90	1.29	4.27	0.89	1.54	0.208

<sup>a</sup>df = (3,108).

\*p < 0.05.

"consulting" ( $F = 2.95$ ,  $p = 0.036$ ), administrators were more involved in consulting activities in the professional and mixed settings than in either education or work settings.

ANOVA results identified several other areas that showed a significant difference in settings. In "planning research" ( $F = 3.27$ ,  $p = 0.024$ ), administrators identified that this occurred most often in professional settings. "Developing research data-collection instruments" ( $F = 3.16$ ,  $p = 0.028$ ) and "writing a book/article" ( $F = 2.95$ ,  $p = 0.036$ ) did not indicate a clear difference for the means throughout the settings. Regarding "conducting research" ( $F = 3.44$ ,  $p = 0.020$ ), this occurred most often in the professional setting. Regarding "problem analysis" ( $F = 3.75$ ,  $p = 0.013$ ), administrators felt they were assisted more often with problem analysis in work, professional, and mixed settings than in educational settings. "Carrying out research projects" ( $F = 3.08$ ,  $p = 0.030$ ) and "writing grant proposals" ( $F = 2.95$ ,  $p = 0.036$ ) occurred most often in the professional setting.

### **Role Socialization Functions**

#### **Research Question 3**

Research question 3 asked: To what extent were mentored academic nurse administrators involved in role socialization functions?

Table 31 in Appendix C shows the percentages of responses for each item given the scale employed from 1

"never"; 2 "seldom"; 3 "often"; 4 "very frequently"; and 5 "always." Role socialization functions with means and standard deviations are shown in Table 23.

In order to assess the perceptions of administrators' role socialization functions, respondents identified how often they were assisted in these functions by their significant mentor. A mean of 3.0 was used as a rating scale for "often," as was specified on the questionnaire to identify the role socialization functions the mentor involved the protégé. The role socialization functions with means of 3.0 and higher were placed in three categories: university/department affairs, curriculum issues, and professional affairs.

In the first category, university/department affairs, administrators were assisted in "serving on the university/college central policy-making body, senate or committee" in addition to "directing and supervising the work of individuals within the department." Administrators assisted in "formulating criteria for retention and graduation of students," "monitored attrition profiles and made futuristic recommendations." They served as a "central source of information regarding the department within the university and community and established goals for the department by looking at the forecast within the profession." Administrators also assisted in revision and

**TABLE 23**

**MEAN AND STANDARD DEVIATION FOR ROLE SOCIALIZATION FUNCTIONS CARRIED OUT  
IN THE MENTOR-PROTÉGÉ RELATIONSHIP**

<b>Role Socialization Functions</b>	<b>Mean</b>	<b>SD</b>
Receive support in decision-making and encouragement towards creating an identity as a future administrator	3.68	1.32
Assist in the supervision, development, evaluation, and revision of the curriculum	3.43	1.36
Assist in serving as a central source of information regarding your unit	3.36	1.25
Assist in formulating criteria for retention and graduation of students in the unit	3.31	1.34
Assist in the revisions and updates of policies that affect both the student and the faculty in the unit	3.18	1.23
Assist in establishing goals for the unit by looking at the forecast within the profession	3.17	1.18
Assist, direct, and supervise the work of individuals within the unit	3.10	1.26
Serve on the university's/college's central policy-making body, senate, or committee	3.09	1.23
Monitor attrition profiles and make futuristic recommendations	3.02	1.38
Collaborate with deans of other units or administrators of the university/college	2.97	1.23
Assist in evaluating faculty performance for reappointment, promotion, and tenure	2.92	1.32
Participate as a co-chairperson in faculty meetings and other decision-making meetings	2.90	1.46
Serve on advisory committees to other units within the university/college community	2.88	1.23
Assist in conducting student recruitment activities for the unit	2.86	1.37
Assist in writing grant proposals and/or reviewing research proposals	2.59	1.23
Participate in preparing long-range budget outlines and goals	2.56	1.27
Assist in the control of disbursement of monies coming directly to your unit from grants and other sources	2.54	1.25
Assist in research involvement, writing, and publishing	2.42	1.18
Assist in the administration of the annual operating budget allocated to the unit	2.38	1.28



updating of policies that affected both the students and the faculty in the department.

In the second category, curriculum issues, administrators were assisted in the "supervision, development, evaluation, and revision of the curriculum." In the third category, professional affairs, administrators "received support in decision-making and encouragement towards creating an identity as a future administrator." Administrators agreed that these role socialization functions were carried out "often" during the mentor-protégé relationship.

Role socialization functions performed less often (using a mean below 3.0) during the mentoring relationship included the following items: budget planning, faculty evaluation, student recruitment, research and grant writing, publishing, collaboration with other departments, and advising.

Table 24 shows Pearson's Correlation Coefficient between role socialization functions in the mentor-protégé relationship and length of relationship. Two items showed a significant relationship at the 0.05 level. First, the longer the relationship the more the administrators were involved in research, writing, and publishing. Second, administrators were more involved in participating as a co-chairperson in faculty meetings and other decision-making meetings involving faculty within the department.

TABLE 24

PEARSON'S CORRELATION COEFFICIENT BETWEEN ROLE SOCIALIZATION FUNCTIONS  
IN THE MENTOR-PROTÉGÉ RELATIONSHIP AND LENGTH OF RELATIONSHIP

Variable: Role Socialization Functions	r	Prob
Serving on the university's/college's central policy-making body, senate, or committee	0.088	0.360
Assist in the control of disbursement of monies coming directly to your unit from grants and other sources	0.009	0.927
Assisting, directing, and supervising the work of individuals within the unit	-0.078	0.416
Assist in evaluating faculty performance for reappointment, promotion, and tenure	0.153	0.108
Assist in formulating criteria for retention and graduation of students in the unit	-0.009	0.928
Monitor attrition profiles and make futuristic recommendations	0.086	0.369
Assist in serving as a central source of information regarding your unit within the university and community	0.015	0.877
Assist in establishing goals for the unit by looking at the forecast within the profession	-0.032	0.736
Assist in the administration of the annual operating budget allocated to the unit	0.049	0.610
Assist in writing grant proposals and/or reviewing research proposals	0.107	0.260
Assist in research involvement, writing, and publishing	0.223	0.018*
Assist in conducting student recruitment activities for the unit apart from general recruitment	0.113	0.235
Assist in the supervision, development, evaluation, and revision of the curriculum	0.152	0.109
Participates as a co-chairperson in faculty meetings and other decision-making meetings	0.221	0.019*
Participate in preparing long-range budget outlines and goals that reflect the financial needs of the unit	0.101	0.287
Assist in the revisions and updates of policies that affect both the student and the faculty in the unit	-0.025	0.795
Collaborate with deans of other units or administrators of the university/college	0.078	0.412
Serve on advisory committees to other units within the university/college community	0.143	0.133
Receive support in decision-making and encouragement towards creating an identity as a future administrator	0.041	0.669

\*p < 0.05.

No significant relationship between length of mentoring and such role socialization functions as administration of annual budget allocation, faculty evaluation for performance, reappointment and tenure, and serving as a central source of information for the department were found.

Table 25 shows that there were significant differences in several of the role socialization functions between the administrators with nurse and non-nurse mentors. These differences included "formulating criteria for retention and graduation of students in the department" and "monitoring attrition profiles and making futuristic recommendations," in addition to "establishing goals for the unit by looking at the forecast within the profession." Differences were also found in the "supervision, development, evaluation, and revision of the curriculum." Administrators also "participated as a co-chairperson in faculty meetings and other decision-making meetings involving faculty within the department" and "assisted in the revisions and updating of policies that affected both the student and the faculty in the department." These role socialization functions were carried out more often with the nurse mentor than the non-nurse mentor. However, administrators with nurse mentors were more involved in these five role socialization functions than administrators with

**TABLE 25**  
**ANOVA RESULTS OF MENTOR-PROTÉGÉ ROLE SOCIALIZATION FUNCTIONS**  
**FOR A NURSE AND A NON-NURSE MENTOR**

Variable: Role Socialization Functions	Nurse (n= 90)		Non-Nurse (n=22)		t	DE	Prob
	Mean	SD	Mean	SD			
Serve on the university's/college's central policy-making body, senate, or committee	3.04	1.17	3.27	1.49	-0.77	110	0.440
Assist in the control of disbursement of monies coming directly to your unit from grants and other sources	2.52	1.16	2.59	1.59	-0.19	26.7*	0.850
Assist, direct, and supervise the work of individuals within the unit	3.14	1.22	2.91	1.41	0.78	110	0.434
Assist in evaluating faculty performance for reappointment, promotion, and tenure	3.01	1.30	2.55	1.34	1.49	110	0.138
Assist in formulating criteria for retention and graduation of students in the unit	3.53	1.25	2.41	1.33	3.74	110	0.003*
Monitor attrition profiles and make futuristic recommendations	3.16	1.35	2.45	1.37	2.18	110	0.031*
Assist in serving as a central source of information regarding your unit within the university and community	3.40	1.18	3.18	1.53	0.73	110	0.470
Assist in establishing goals for the unit by looking at the forecast within the profession	3.32	1.11	2.55	1.30	2.84	110	0.005*
Assist in the administration of the annual operating budget allocated to the unit	2.40	1.25	2.73	1.42	0.41	110	0.680
Assist in writing grant proposals and/or reviewing research proposals	2.66	1.25	2.32	1.17	1.15	110	0.250
Assist in research involvement, writing, and publishing	2.52	1.17	2.00	1.11	1.89	110	0.060
Assist in conducting student-recruitment activities for the unit apart from general recruitment	2.96	1.39	2.45	1.22	1.55	110	0.120
Assist in the supervision, development, evaluation, and revision of the curriculum	3.69	1.22	2.41	1.44	4.24	110	0.001*
Participate as a co-chairperson in faculty meetings and other decision-making meetings	3.09	1.45	2.14	1.28	2.82	110	0.005*
Participate in preparing long-range budget outlines and goals that reflect the financial needs of the unit	2.61	1.25	2.36	1.36	0.82	110	0.410
Assist in the revisions and updates of policies that affect both the student and the faculty in the unit	3.29	1.20	2.73	1.28	1.94	110	0.050*
Collaborate with deans of other units or administrators of the university/college	2.97	1.19	3.00	1.41	-0.11	110	0.910
Serve on advisory committees to other units within the university/college community	2.86	1.18	3.00	1.45	-0.49	110	0.620
Receive support in decision-making and encouragement towards creating an identity as a future administrator	3.60	1.16	4.00	0.98	-1.49	110	0.140

\*Due to unequal group variances.

\*p < 0.05.

non-nurse mentors during the mentor-protégé relationship.

Table 26 shows ANOVA results for comparing Mentor-Protégé Role Socialization Functions for the four mentoring settings. At the 0.05 level, three areas showed a significant difference among the settings. First, in the area of "assisting, directing, and supervising the work of individuals within the unit" ( $F = 3.18$ ,  $p = 0.03$ ), among the settings, administrators agreed that this occurred more in the work and mixed settings than in the educational or professional setting. Second, "assisting in the revision and updates of policies that affected both the student and the faculty in the unit" ( $F = 2.78$ ,  $p = 0.04$ ) occurred more often in education, work, and mixed settings than in professional settings. Third, serving on advisory committees to other units within the university/college community ( $F = 2.83$ ,  $p = 0.04$ ) occurred more often in work and mixed settings than in educational and professional settings.

#### **Mentored and Non-mentored Present Executive Profile**

##### **Research Question 4**

Research question 4 asked: Did mentored and non-mentored academic nurse administrators differ in their present executive profile?

**TABLE 26**  
**ANOVA RESULTS OF MENTOR-PROTÉGÉ ROLE SOCIALIZATION FUNCTIONS**  
**UNDER FOUR MENTORING SETTINGS**

Variables/Settings	Educational (n= 52)		Work (n = 35)		Professional (n= 10)		Mixed/Other (n=15)		F <sup>a</sup>	Prob
	M	SD	M	SD	M	SD	M	SD		
Serve on the university's/college's central policy-making body, senate, or committee	3.25	1.23	2.97	1.31	2.50	0.85	3.20	1.21	1.22	0.30
Assist in the control of disbursement of monies coming directly to your unit from grants and other source	2.44	1.21	2.66	1.33	1.80	0.63	3.07	1.33	2.34	0.78
Assist, direct, and supervise the work of individuals within the unit	2.96	1.24	3.26	1.34	2.30	0.82	3.73	1.10	3.18	0.03*
Assist in evaluating faculty performance for reappointment, promotion, and tenure	2.85	1.27	3.06	1.49	2.40	0.84	3.20	1.26	0.93	0.43
Assist in formulating criteria for retention and graduation of students in the unit	3.27	1.30	3.17	1.44	3.20	1.32	3.87	1.19	1.03	0.38
Monitor attrition profiles and make futuristic recommendations	2.90	1.32	2.94	1.51	3.10	1.29	3.53	1.30	0.86	0.46
Assist in serving as a central source of information regarding your unit within university and community	3.27	1.27	3.40	1.29	2.70	0.95	4.00	1.07	2.43	0.07
Assist in establishing goals for the unit by looking at the forecast within the profession	3.13	1.09	3.20	1.28	2.60	0.84	3.60	1.40	1.47	0.23
Assist in the administration of the annual operating budget allocated to the unit	2.21	1.16	2.51	1.46	2.00	0.94	2.87	1.36	1.46	0.23
Assist in writing grant proposals and/or reviewing research proposals	2.37	1.21	2.66	1.28	2.80	1.14	3.07	1.22	1.47	0.23
Assist in research involvement, writing, and publishing	2.31	1.13	2.31	1.23	3.00	1.05	2.67	1.23	1.30	0.28

Table 26--Continued.

Variables/Settings	Educational (n= 52)		Work (n = 35)		Professional (n= 10)		Mixed/Other (n=15)		F <sup>a</sup>	Prob
	M	SD	M	SD	M	SD	M	SD		
Assist in conducting student- recruitment activities for the unit apart from general recruitment	2.54	1.28	2.94	1.43	3.50	1.18	3.33	1.45	2.42	0.07
Assist in the supervision, development, evaluation, & revision of the curriculum	3.44	1.30	3.17	1.50	3.80	1.03	3.80	1.37	1.04	0.38
Participate as co-chairperson in faculty meetings & other decision-making meetings	2.83	1.37	2.71	1.60	3.10	1.10	3.47	1.64	1.04	0.38
Participate in preparing long-range budget outlines & goals that reflect financial needs of unit	2.40	1.18	2.51	1.40	2.50	1.08	3.27	1.28	1.87	0.14
Assist in revisions & updates of policies that affect both student & faculty in the unit	3.04	1.20	3.31	1.30	2.50	0.97	3.80	1.08	2.78	0.04*
Collaborate with deans of other units or administrators of the university/college	3.04	1.15	3.17	1.29	2.00	0.94	2.93	1.33	2.53	0.06
Serve on advisory committees to other units within the university/college community	2.81	1.19	3.06	1.30	2.00	0.94	3.33	1.11	2.83	0.04*
Receive support in decision-making & encouragement towards creating identity as future administrator	3.54	1.09	3.89	1.09	3.70	1.57	3.67	1.11	0.65	0.58

<sup>a</sup>df = (3,108).

\*p &lt; 0.05.

Subjects were asked several questions to determine if there were significant differences between the self-perceived present executive profile of mentored and non-mentored academic nurse administrators as measured by the responses. The intent was to determine whether or not there were differences on several aspects of their current executive profile.

The present executive profile questions were categorized and included job satisfaction, finance, and education/advocates for nursing and mentoring. Table 27 shows the means and standard deviations of the response scores for both the mentored and non-mentored academic nurse administrators. The alpha level for testing all statements was set at 0.05.

In job satisfaction, no item showed a significant difference between the mentored and non-mentored group. However, the means for the mentored group was higher than the non-mentored group, suggesting more overall job satisfaction.

In finance, there was a significant difference between the two groups in "competent in the areas of business and finance" ( $t = -2.09$ ,  $p < 0.03$ ), with mentored administrators indicating they felt more competent. No significant difference between the two groups with respect to "competent to carry out management of the financial dimensions of the job" was found. Non-mentored



TABLE 27

**t-TEST COMPARISON OF PRESENT EXECUTIVE PROFILE SCORES ON MENTORED  
AND NON-MENTORED ADMINISTRATORS**

Present Executive Profile	Mentored (n = 112)		Non-Mentored (n = 43)		t	DF	Prob
	Mean	SD	Mean	SD			
<i>Job Satisfaction</i>							
I did not expect to work so hard to maintain resources for the unit I administer.	3.28	1.41	3.23	1.46	-0.17	152	0.86
I am satisfied with my work in academic administration.	4.04	0.87	3.91	0.97	-0.85	153	0.39
I am satisfied with the financial reimbursement of my position.	3.22	1.36	2.81	1.28	-1.70	153	0.09
I did not expect my position to be as demanding of time and personal energy.	3.32	1.38	3.16	1.40	-0.63	153	0.52
I am satisfied with my current role and level of position.	3.83	1.04	3.51	0.98	-1.78	153	0.07
<i>Finance</i>							
I am competent in the areas of business and finance.	3.84	0.84	3.51	0.94	-2.09	153	0.03*
I am competent to carry out management of the financial dimensions of my job.	4.10	0.75	4.14	0.60	0.39	153	0.69
<i>Education/Advocates for Nursing</i>							
Nurses who hold a graduate or higher degree in nursing are stronger advocates for nursing than nurses who hold graduate degrees in other fields.	3.58	1.41	3.53	1.40	-0.16	152	0.86
The type of educational background of the nurse executive does not make a difference for this position.	2.50	1.36	2.41	1.19	-0.38	153	0.70
Being on the executive level I feel removed from the profession of nursing.	2.43	1.38	1.88	0.98	-2.80	106.8 <sup>a</sup>	0.01*
The best preparation for administration position is graduate education or higher.	4.22	1.04	4.33	0.71	0.69	110.2 <sup>a</sup>	0.48
<i>Mentoring</i>							
It is important for nurses moving into higher level management positions to have a mentor.	4.18	0.81	3.72	0.85	-3.11	153	0.01*
It is important that I act as a mentor for future academic nurse administrators.	4.40	0.59	3.95	0.75	-3.50	62.9 <sup>a</sup>	0.01*
I would highly recommend a mentoring affiliation for academic nurse administrators prior to holding full authority for the position.	4.12	0.91	3.81	0.98	-1.87	150	0.06

<sup>a</sup>Due to unequal group variances.

\*p < 0.05.

administrators (mean = 4.14) agreed more to this than the mentored administrators (mean = 4.10).

Education/advocates for nursing had only one item that showed a significant difference between the groups. This item, "Being on the executive level I feel removed from the profession of nursing" ( $t = -2.80$ ,  $p = 0.01$ ), could suggest that once nurses achieved the academic status to hold the position of an academic nurse administrator, the non-mentored group (mean = 1.88,  $SD = 0.98$ ) felt less removed from the profession of nursing than the mentored group (mean = 2.43,  $SD = 1.38$ ). Non-significant findings indicated that non-mentored administrators (mean = 4.33) showed more agreement to the statement "the best preparation for the administrative position is graduate education or higher" than the mentored administrators (mean = 4.22).

Two items in the category "mentoring" showed a significant difference between the groups. Regarding "It is important for nurses moving into higher-level management positions to have a mentor" ( $t = -3.11$ ,  $p = 0.01$ ), the mentored administrators mean was 4.18 compared to 3.72 for the non-mentored, indicating that the mentored group felt more strongly towards having mentors prior to moving into higher-level management positions. Regarding "it is important that I act as a mentor for future academic nurse administrators" ( $t = -3.50$ ,  $p = 0.01$ ), the mentored group again felt more strongly on this issue with a mean of 4.40

compared to 3.95 for the non-mentored. In addition, more mentored administrators (mean = 4.12) agreed to "recommending a mentor affiliation for academic nurse administrators prior to holding full authority for the position" than did non-mentored administrators (mean = 3.81).

### Summary

The statistical approaches used to answer and test the research questions were descriptive statistics, Pearson's correlation coefficient, *t*-test, ANOVA, and Student-Neuman-Keul's (SNK). The findings of this study showed that mentoring was cited by the majority of academic nurse administrators as a supportive experience that prepared them for their current role. More than half of the respondents indicated that a mentoring relationship would make a difference in one's career progress and would recommend a mentoring relationship for prospective academic nurse administrators.

In addition, the following were found:

1. The past mentor-protégé relationship was positive, whereas the existing relationship at the time the questionnaire was answered was not as strong as the past.
2. The length of the mentor-protégé relationship did not have a significant bearing on the characteristics or nature of the relationship.

3. A majority of the academic nurse administrators reported that their mentoring experiences occurred more often in educational settings than in work, professional, or mixed settings.

4. Academic nurse administrators indicated they were guided more in clinical activities by nurse mentors as compared to non-nurse mentors.

5. Significant differences in group means were found for "competitive." Administrators whose mentors were non-nurses felt that their mentor-protégé relationship was more competitive than did administrators with nurse mentors.

6. Academic nurse administrators were more frequently involved in various functions under a professional setting than in other settings.

7. Administrators with nurse mentors were more involved in role socialization functions than those with non-nurse mentors.

8. Several differences were found in the areas of finance, education/advocates for nursing, and mentoring between the mentored and non-mentored academic nurse administrators.

An analysis of data also showed that:

1. There was a significant difference between the mentored and non-mentored academic nurse administrators towards the importance of having a mentor for nurses moving into higher-level management positions.

2. There was a significant difference between the mentored and non-mentored academic nurse administrators on the importance that they act as a mentor for future academic nurse administrators.

3. There was a significant difference between the mentored and non-mentored academic nurse administrators in that being on the executive level they felt removed from the profession of nursing.

4. There was no significant difference between the mentored and non-mentored groups in the area of job satisfaction.

5. Both groups indicated that having a graduate or higher degree in nursing made them stronger advocates to be academic nurse administrators than those who held degrees in other fields.

6. There was a significant difference between the two groups on recommending a mentoring affiliation for academic nurse administrators prior to holding full authority for the position--the mentored group was highly supportive and in agreement to a mentor affiliation prior to holding authority as an academic nurse administrator.

## **CHAPTER V**

### **SUMMARY, DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS**

#### **Introduction**

This chapter contains a summary of the study, results, discussion, conclusions developed from the results of the study, and recommendations for practice and further study.

#### **Summary**

This summary includes the purpose of the study, the significance of the study, a brief overview of the literature, the methodology applied, the population and sample, and the instrument.

#### **Purpose of the Study**

This study examined and explored the nature of mentoring and its relationship with role socialization for the academic nurse administrator. This study investigated the following research questions:

1. What were the defining characteristics of the mentor-protégé relationship among academic nurse administrators?

2. What academic functions and activities did mentored academic nurse administrators engage in most frequently with mentors?

3. To what extent were academic nurse administrators involved in role socialization functions during the mentoring relationship?

4. Did mentored and non-mentored academic nurse administrators differ in their present executive profile?

#### **Significance of the Study**

Research from a systematic study of mentoring among nurse executives could contribute towards the development of a mentoring framework for use within the nursing profession. Recognition of the fact that the prevailing mode of socialization for academic nurse administrators is less than optimal suggests the need to examine the process of role socialization. The significance of this study could provide the recognition and utilization of mentoring programs to increase role socialization for academic nurse administrators within the academic community. This study was conducted in the hope that it might help academic nurse administrators gain insight into their own administrative role socialization functions and mentoring relationship effectiveness as a step forward in developing their proficiency as academic nurse leaders. This study might furnish valuable information to personnel who are responsible for improving academic nurse administrators'

effectiveness in the following areas: (1) the development or revision of mentoring programs in doctoral programs and for prospective and beginning academic nurse administrators, (2) the development of role socialization functions for academic nurse administrators to include the following information: university/department affairs, budgetary planning, grant writing, research, publication, and curriculum issues, and (3) the development or revision of strategies for selecting academic nurse administrators.

#### **Overview of the Literature**

The literature reviewed focused on those aspects of mentoring and role socialization that were most pertinent to this study. The areas explored fall into nine sections: background information on mentoring and role socialization, prevalence of mentoring in business, prevalence of mentoring in nursing and nursing education, mentoring for administrative management and organizational socialization, mentoring for the value to the protégé, mentoring for the value to the organization, the impact of mentoring on career success, socialization for roles, and role preparation and role socialization specific to the academic nurse administrator. The social-learning theory developed by Bandura (1966) provided the theoretical framework for this study.

Hawken (1980) and Chanings and Brown (1984) explored the mentor relationship as a strategy for developing



academic leadership, specifically the role of the dean. Hawken (1980) proposed a relationship with the work setting in which an assistant was identified and served as protégé for a finite period of time to learn "the art and science" of deaning. She viewed this study as a way to strengthen the academic leadership pool and to provide more knowledge and better-prepared individuals for top academic administrative positions, with a higher probability of productivity and survival. In Spengler's (1982) study on female nurses with doctorates, the career development of those mentored was statistically significantly higher than those in the non-mentored group.

Newby and Heide (1992) identified that a mentoring program is beneficial in that it provides individualized attention from someone who has a great deal of experience, a degree of success and respect, and who can supply information that may otherwise be inaccessible within an organization. Felton (1978) postulated that the paucity of women in leadership positions was related to the lack of mentors to assist in reestablishing networks that promote career progress, advancement, and success.

The direct assets of a mentor relationship to a professional group are many. Such a relationship will socialize a person or persons to the professional norms, values, and standards, will provide entry into the inner circles of the profession, and will promote the profession's

growth by ensuring continuity and quality of leadership. This is the role socialization process that fosters critical elements in the development and advancement of promising professionals such as academic nurse administrators.

Pilette (1981) cited the importance to nursing of the person-centered leadership found in mentoring, and advocated promotion of the mentor relationship as a strategy to develop and strengthen leadership within the profession. Modeling influences learning primarily through specific informative functions. Bandura (1977) noted that during exposure the observer primarily acquired symbolic representations of the modeled activities, which then served as a guide for appropriate performances.

### **Methodology**

This study employed the survey research methodology to investigate mentoring and its relationship with role socialization of the academic nurse administrator.

Descriptive statistics was used to analyze the data pertaining to academic nurse administrators' professional information. Percentages, means, and standard deviations were computed to analyze the professional information. The  $t$ -test was used to analyze the difference between a nurse and non-nurse mentor on mentor characteristics, mentor functions, and activities. Pearson's correlation coefficient was used to examine the relationships between the mentor-protégé and the length of the relationship. The

activities and functions carried out in the relationship and the length of the relationship were also analyzed using Pearson's coefficient. ANOVA was used to examine whether the work settings were related to the mentor-protégé functions and activities. ANOVA was also used to identify significant differences of mentor-protégé role socialization functions in four mentoring settings. The Student-Neuman-Keuls (SNK), a Post Hoc Multiple Comparison Procedure, was used to identify pairwise differences for all significant F's in the analysis of variance.

#### **Population and Sample**

The population for this study was comprised of deans and administrators of baccalaureate or higher-degree nursing programs who held the academic title "Dr.," "dean," or "chairperson." This study was limited to five states within the Midwest, namely: Michigan, Indiana, Illinois, Ohio, and Wisconsin. Forty administrators from each state were randomly selected resulting in a sample size of 200 for this study. Members of the population were identified from the 1993 official list of the National League of Nursing (NLN) Council of Baccalaureate and Higher Degree Programs, which listed names, titles, and school addresses. One hundred and fifty-five subjects returned the questionnaire. Of the 155 subjects who responded, 112 (72.2%) were mentored and 43 (27.2%) were non-mentored.

### **Instrument**

The Mentoring Role Socialization Survey was the instrument used to collect data on academic nurse administrators. A three-part questionnaire was developed to determine professional information, mentor-protégé characteristics, and role socialization functions.

### **Results**

#### **Demographic Description of the Administrators and Related Experience(s)**

Frequency data relevant to the professional and demographic information revealed that the majority of administrators were female between 46 to 55 years of age and held doctorate degrees with 5 years or less experience in their current position. All administrators were full-time faculty in a college or university and indicated nursing education as the major experience gained prior to assuming their current position. Most administrators were encouraged by peers and colleagues to enter academic administration. Respondents reported that 56% were mentored and 22% were non-mentored. In the four mentoring settings, mentoring experiences occurred most often in educational settings with a mean of 5.68 years for the length of the mentor-protégé relationship.

A major outcome of this study was that administrators who did not have a mentor were highly

supportive that a mentor would have made a difference in their career progress and would recommend a mentoring relationship for prospective academic nurse administrators. Respondents with mentors reported a more definitive sense of career satisfaction and a greater sense of achievement related to their career progress than did respondents without mentors. There was no positive relationship between mentor activities and functions and role socialization functions. The results of this study are congruent with those that might be predicted by social-learning theory (Bandura, 1969). This theory predicts that most learning occurs as the result of having direct experiences observing the behavior of others and the consequences of that behavior. By their own description, the protégés looked up to their mentors, respected them for their knowledge and expertise, and valued their opinion. Mentors listened to the protégés' ideas, gave them feedback in the form of constructive criticism, and promoted testing and communicating their ideas.

### **Results of Research Questions**

#### **Research Question 1**

Research question 1 asked: What were the defining characteristics of the mentor-protégé relationship among academic nurse administrators? The results indicated:

1. Mentor-protégé relationships among academic nurse administrators are somewhat prevalent as reported by 57% of the respondents.

2. Administrators with mentors reported the relationship as positive, supportive, intellectually stimulating, encouraging independent growth, assisting them towards their current responsibilities, and encouraging risk-taking and further education.

3. Administrators indicated that the length of time the mentor-protégé relationship lasted did not have a significant bearing on the characteristics or nature of that relationship.

4. There was a significant difference between a nurse and a non-nurse mentor in the area of "competitive." However, administrators with non-nurse mentors felt that the mentor-protégé relationship was somewhat more competitive than that of their colleagues who had nurse mentors.

5. There were no significant differences in how the administrators felt about the mentor characteristics, with one exception. Administrators with non-nurse mentors agreed somewhat more that they were assisted in the following areas: encouraged independent growth, promoted decision-making and testing of ideas, fostered exploration of ideas, encouraged risk-taking, encouraged further education, and assisted them towards their present career responsibilities.

6. Administrators agreed that in all four mentoring settings the mentor-protégé relationship included the following characteristics: the relationship was supportive, independent growth was encouraged, decision-making and testing of ideas were promoted, exploration of ideas was fostered, and encouragement was given to further the protégé's education.

#### **Research Question 2**

Research question 2 asked: What academic functions and activities did mentored academic nurse administrators engage in most frequently with mentors? The results revealed:

1. Administrators indicated that throughout the mentor-protégé relationship the mentor served as a positive role model, encouraged their intellectual development, and encouraged them to believe in themselves. The relationship provided a two-way exchange of ideas, encouraged the protégé to think independently, the introduction to important others was made possible, and the mentor was able to give the protégé advice in dealing with specific situations and problem-solving.

2. The length of the mentoring relationship was significantly related to most of the functions carried out in the mentor-protégé relationship and included: providing personal and career counseling, identifying helpful contacts

for assistance or information, and receiving encouragement to become involved in research.

3. The length of the mentoring relationship was significantly related to several activities such as planning and conducting research, developing research design, developing research data collection, presenting a research paper, and problem analysis.

4. There was a significant difference between the nurse and non-nurse mentor on mentor functions. More administrators reported they were guided in clinical activities, assisted in a two-way exchange of ideas, encouraged to write and publish their ideas, and had letters of reference written by nurse mentors rather than by non-nurse mentors. Nurse mentors also assisted more in the areas of teaching, curriculum issues, and reviewing research proposals.

5. There was a significant difference in the mentoring settings. More administrators reported they were taught new skills, had exposure to personal counseling, were encouraged to create their own space, and were given advice in dealing with specific situations and problem-solving in professional settings than in educational, work, or mixed settings; more administrators were introduced to important others in professional, work, and mixed settings than in educational settings; more administrators were included in the mentor's work and given guidance in professional, work,



and mixed settings than in educational settings; more administrators were involved in functioning in an administrative position as an activity in work and mixed settings than in professional or educational settings.

### **Research Question 3**

Research question 3 asked: To what extent were academic nurse administrators involved in role socialization functions during the mentoring relationship? The results indicated:

1. There was a significant relationship between role socialization functions in the mentor-protégé relationship and the length of the relationship. The longer the relationship, the more administrators were involved in research, writing, and publishing. In addition, they participated as a co-chairperson in faculty meetings and other decision-making meetings involving faculty within the department.

2. No significant relationships were found between the length of mentoring and such role socialization functions as administration of the annual budget allocation, faculty evaluation for performance, reappointment, and tenure, and serving as a central source of information for the department.

3. There were significant differences in several of the role socialization functions between nurse and non-nurse mentors. Nurse mentors were more supportive and involved

the administrators more frequently in student, faculty, curriculum, and department affairs than did the non-nurse mentors.

4. There were significant differences between the mentored and non-mentored administrators on role socialization functions in the four mentoring settings. Administrators agreed that in the work and mixed settings they were assisted more with the following functions: assisting, directing and supervising the work of individuals within the department, and serving on advisory committees to other departments within the university/college community. Administrators agreed that in educational, work, and mixed settings they were assisted more in the revisions and updating of policies that effected both students and faculty.

#### **Research Question 4**

Research question 4 asked: Did mentored and non-mentored academic nurse administrators differ in their present executive profile? The results indicated:

1. There were no significant differences between the mentored and non-mentored administrators in the area of job satisfaction.

2. There were significant differences between the mentored and non-mentored administrators on their existing executive profile in the area of finance. More mentored

administrators agreed they were competent in the areas of business and finance.

3. There was a significant difference in the area of education/advocates for nursing. More mentored administrators believed that, being on the executive level, they felt more removed from the profession of nursing than did the non-mentored administrators.

4. There was a significant difference in the area of mentoring. Mentored administrators felt stronger than non-mentored administrators on the importance of having mentors for nurses who are moving into higher-level management positions; administrators need to act as mentors for future academic nurse administrators and would highly recommend a mentoring affiliation for academic nurse administrators prior to holding full authority for the position.

### **Discussion**

This study investigated the characteristics of mentoring and its relationship with role socialization functions for the academic nurse administrator. It also examined the functions of the mentor, functions and activities of the protégé, and the perceived difference of mentored and non-mentored administrators.

The results on academic nurse administrators indicated that mentoring was highly supportive prior to holding full authority for a job of this nature. Atwood

(1979) reported that a mentor can facilitate the adjustment of a neophyte nurse to the realities of the workplace. Vance (1982) suggested that the profession also benefits when norms and standards are passed on in a reliable and effective manner. Growth of the profession is enhanced as quality leaders are developed and continuity is maintained. According to Bandura (1969), the learning of social norms and subsequent identification with a social group or society was the result of observational learning--the process of observing and decoding relevant role model behavior, which, in the presence of appropriate environmental cues, will be reproduced if it has been and continues to be appropriately reinforced.

The results on administrators with mentors indicated that the relationship was positive, intellectually stimulating, encouraged independent growth, and assisted them towards their current responsibilities. Throughout the four mentoring settings, administrators agreed that the relationship was supportive, independent growth was encouraged, and decision-making and testing of ideas was promoted. Overall, administrators felt that nurse mentors were more supportive, and frequently involved them in student, faculty, curriculum, and departmental affairs.

In the existing executive profile and role socialization functions, administrators agreed that the longer the relationship lasted the more they were involved

in research, writing, and publication. They participated as co-chairperson in faculty meetings and assisted in decision-making involving faculty. Nurse mentors were more supportive and involved administrators in curriculum and department affairs. On the existing executive profile, mentored administrators felt more competent in the area of finance and on the importance of having mentors for nurses moving into higher-level management positions. A significant difference found for mentored administrators was that being on the executive level they felt removed from the profession of nursing. Perhaps the reason why the administrators viewed themselves in this way was because the mentoring setting was in a non-clinical environment.

In practice, the academic nurse administrators could be more effective if they experienced one or more mentor-protégé relationships. "Satisfactory performance in a professional role requires an individual to possess certain beliefs, knowledge, skills, and motives which are acquired in the process of socialization." Mentoring is one strategy to ensure successful socialization (Hall et al., 1981, p. 93).

There was collaborative agreement on the supportive role and characteristics of the mentors. In addition, administrators indicated they would highly recommend a mentor affiliation prior to holding full authority in an administrative academic position. For role socialization

functions, administrators were involved in scholarly activities such as research, writing, and publication. They were also involved in professional development and decision-making skills. The longer the relationship, administrators participated more in these scholarly and professional development functions. Respondents reported some of these functions as seldomly occurring: collaboration on research, writing, publication, and presentation of papers with the mentor. One possible explanation for the lack of collaborative efforts between mentors and protégés is that the mentor may be less active in research and scholarly activities than in other activities. Time constraints may have prevented participation in long-term activities and functions.

The results concerning administrators with non-nurse mentors indicated that the relationship was somewhat more competitive. Fewer administrators felt removed from the profession of nursing at the executive level with non-nurse mentors. Also, non-nurse mentors were not as supportive of the administrators in such areas as student, faculty, curriculum, and department affairs. Administrators also indicated that the non-nurse mentors served as positive role models more than the nurse mentors. Perhaps the difference was because the experiences and knowledge the nurse mentors imparted was at a more critical level.

There were significant differences in the mentoring settings. In professional settings there was strong agreement that administrators were taught new skills, were provided personal counseling, were encouraged to create their own space, and were given advice in dealing with specific situations and problem-solving. Most of the other role socialization functions occurred in a combination of the settings, which included education, work, and mixed settings. This could be due to the lack of nursing knowledge and specific role preparation information the non-nurse mentor was not aware had to be delivered.

These findings suggest that administrators had a satisfactory relationship with mentors. There was a high positive correlation that mentored administrators felt satisfaction with their mentoring relationships and would even act as a mentor for future academic nurse administrators. Mentored administrators identified more job satisfaction in academic administration and with the role and level of their position more so than the non-mentored administrators.

According to the results of this study, there was insufficient evidence to prove that the mentoring activities and functions carried out during the mentoring relationship were positively correlated to the role socialization functions. Yet, some similarities in the mentoring activities and functions could be identified as role

socialization functions. These functions included scholarly activities, professional development, and problem-solving skills. This indicated that mentoring affiliation should include specific job descriptions that would later enhance role socialization functions. In the present executive profile there was no significant difference between the groups on job satisfaction. In the area of finance there was a significant difference between the groups where the mentored felt more competent in the areas of business and finance. There was a significant difference between the groups where the mentored administrators were totally supportive of mentoring.

These findings were indicators to support the following assumptions:

1. Mentoring relationships are likely to lead to positive consequences for the protégé.
2. The longer the mentor-protégé relationship, the more likely the protégé became involved in functions and activities carried out by the mentor.
3. Differences in outcomes were found between mentored and non-mentored administrators.

These findings might provide some information for administrators to develop and promote organized mentorships programs. More important, the concept and definition of role socialization should be examined to determine if in fact these are changes to be expected.



### **Conclusions**

Based on the results and discussion, the following conclusions are drawn:

1. The academic nurse administrators support the importance of mentoring in academic settings.

2. The academic nurse administrators perceived the mentor clearly as a positive, pivotal figure in their academic lives especially in terms of serving as a future mentor.

3. The mentor did not strongly influence research and scholarly endeavors such as writing, publishing, and presenting papers.

4. Most administrators perceived that mentors provide some role modeling and career-related and psychosocial functions leading to beneficial outcomes.

5. Mentoring may facilitate role socialization as a transition into an administrative role.

6. Functions and activities the administrators participated in during the mentoring relationship were similar to some of the role socialization functions.

### **Recommendations**

#### **Recommendations for Practice**

Based on the results of this study, the following recommendations for practice are made:

1. The findings of this study suggest certain recommendations for those interested in pursuing careers in nursing education administration. An active, involved, helpful mentor could make a difference in career development. From the data on the mentoring relationships experienced by administrators, it is clear that mentors function and assist protégés in different ways. This study has strong implications for practice. Nurses in academic administrative positions might demonstrate leadership by managing complex situations with reasonable thoroughness and sensitivity. How do administrators learn these socialization functions for a new role? Mentoring is an effective means of preparing administrators for leadership succession and ongoing leadership roles.

2. Further comparison should be made between the career development of nurse doctorates in this study and the career patterns of women in other female-intensive occupations to determine similarities and differences. Qualitative and quantitative data from such studies would provide important information and a new body of knowledge related to career development and career stages of women.

3. In doctoral education, mentorships should be a practicum requirement to strengthen theory and practice. Doctoral education, without the presence of a mentoring relationship, will be incomplete. The necessity and importance of mentoring in doctoral nursing education has

been minimally addressed. Components of this relationship should include: professional strategies, sharing of common interests, scholarly activities, personal goal directedness, and curriculum issues. This exposure to the academic arena would facilitate the mentee's development, expanding knowledge and providing strategy for growth and development within professional boundaries.

4. An exploration of academic nurse administrators' behavior as head of the organization is recommended to understand more fully the important components that would facilitate socialization into the job functions. Further research is needed to investigate the importance of the timing of the mentoring relationship and the interaction between having one or several mentors and pursuing a higher degree.

5. A mentoring relationship may not be a realistic expectation for all new academic nurse administrators. Other aspects should be explored in addition to mentoring, such as sponsors to assist with specific aspects of the academic role and peer group matching. A variety of helping relationships could be developed to facilitate role socialization of new academic nurse administrators. As the novice no longer requires assistance, these relationships may evolve into collegiality, respect for each other's contributions, and facilitation of professional development.

6. The concept of role socialization and selective factors of socialization (education, role preparation, and mentoring) need to be further investigated. Future research is needed to determine whether nursing educational programs have a significant influence on professional socialization when compared with the workplace.

7. Study findings should be disseminated to practicing nurses who desire ultimate academic administrative roles. These findings may promote mentor-protégé relationships as a valuable strategy to achieve career success.

#### **Recommendations for Further Study**

Based on the results of this study, these recommendations are made:

1. A longitudinal study, at 3-year intervals, of the academic nurse administrators who participated in this study could be carried out. This would provide data from which long-term effects of the mentor-protégé relationship could be determined. This could identify important information that would be useful in assisting younger nurses to better plan their career development.

2. Further study could be done on mentor-protégé involvement with scholarly and professional development (research, writing and publication, role modeling, and problem analysis).

3. Further study could be done on the context of role socialization functions and its relationship to mentoring functions for the academic administrative role in nursing.

4. Further experimental research could be conducted to determine whether academic nurse administrators with formal mentoring relationships are significantly different in utilizing their administrative skills from those without such training.

5. Qualitative research could be conducted to reveal the possible mentor characteristics and functions that might relate to the leadership style, administrative effectiveness, and role socialization of academic nurse administrators.

6. Further research could be conducted in the area of politics and its relationship to mentoring.

7. Further research could be conducted in the areas of the various mentoring settings to clarify those settings and their relationship to mentoring.

## APPENDICES

**APPENDIX A**  
**LETTERS**

Anna Vance, RN, (Doctoral Candidate)  
345 Elmside Road  
Benton Harbor, MI 49022

April 20, 1994

Carol Spengler, RN, Ph.D.  
Director, Psychiatric Nursing Department  
University of Michigan, Medical Center  
CFOB B3952 Box 0704  
1500 E Medical Center Drive  
Ann Arbor, MI 48109-0704

Dear Dr. Spengler:

I am a doctoral student studying educational administration at Andrews University, Berrien Springs, Michigan. I have completed my course of study along with a doctoral cognate in nursing administration and am now in the dissertation process. The title of my dissertation is "Mentoring and its relationship to the role socialization of academic nurse administrators."

I have found your dissertation entitled, "Mentor-Protege Relationships: A Study of Career Development Among Female Nurse Doctorates," most applicable to the focus of my study. The concepts and characteristics of mentoring you identified would be most applicable to the focus of my study. I will add role socialization characteristics to my final tool after reviewing the literature. I plan to explore mentoring and its effects on the role socialization process as perceived by the respondents.

I am writing to request your permission to utilize your copyrighted instrument for my data collection and permission to modify the instrument to fit my particular population and focus of my dissertation. I will give you proper recognition concerning your instrument and work when I publish my findings.

Thank you in advance for your time and consideration. I look forward to future correspondence and sharing the results of my study with you. I would appreciate if you would be able to respond to my request no later than May 1st.

Sincerely,  
Anna Vance





University of Michigan  
Medical Center

Department of Pediatric/Perinatal/Psychiatric Nursing  
C. S. Mott/Women's/Holden/Psychiatric Hospitals  
1500 E. Medical Center Drive  
83952 CFOB, Box 0704  
Ann Arbor, Michigan 48109-0704

**Carol D. Spengler, Ph.D., R.N.**  
Associate Hospital Administrator and Director of Nursing

April 28, 1994

Anna Vance  
345 Elmside Road  
Benton Harbor, MI 49022

Dear Anna,

Consider this letter permission to use the Spengler Mentor-Protégé Survey. I would like to request that you send me a copy of your abstract when you have completed your research. Good luck!

Sincerely, .

A handwritten signature in cursive script that reads "Carol D. Spengler".

Carol D. Spengler, PhD, RN, FAAN  
Associate Administrator and Director  
Pediatric, Perinatal, Psychiatric Nursing

CDS:acg



# ANDREWS

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## UNIVERSITY

28 March, 1994

Dear Colleague:

I am conducting my dissertation pilot study. This study focuses on mentoring and its relationship to the role socialization of academic nurse administrators in NLN baccalaureate and higher degree programs. The purposes of my study are to describe the characteristics and frequency of mentoring as reported by this group and to assess the influence that this relationship has on role socialization.

May I request you to complete the enclosed questionnaire which consists of three sections. I will be very grateful if you will take the short time needed to fill out the questionnaire including your documented perceptions and experiences requested in some items. Because this is a pilot study, please feel free to make suggestions on the format, questions or content. Please be assured that your responses will be confidential.

There is little specific information available about the actual role socialization of academic nurse administrators. A greater understanding of what can be done to assist those in their present position and others aspiring to this role could lead to innovative plans for the future. I realize that this request requires an investment of your time. I hope that you will find that this topic is of interest to you.

Please mail your completed questionnaire in the enclosed stamped, self-addressed envelope by April 12, 1994. Your prompt response will be greatly appreciated. If you have any question, please feel free to call me at work, 219-257-3377 or home, 616-925-9495.

Thank you for helping me with this stage of my dissertation process.

Sincerely,

Anna R. Vance  
Doctoral Candidate

Enclosures

Approved: Edward A. Streeter, Ed.D., Chairperson, Dissertation Committee

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Berrien Springs, MI 49104 (616) 471-7771



# ANDREWS

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## UNIVERSITY

April 29, 1994

Dear Colleague:

I am requesting your assistance and participation in my dissertation research project on deans and academic administrators of nursing. The focus of the study will be on the nature of mentoring and its relationship to the role socialization for academic nurse administrators. This data can best be provided by those who are functioning as a dean, director, chairperson or an academic nurse administrator.

There is little specific information available about the nature of mentoring and its effect on the role socialization for this select group. A greater understanding of the career development and achieved administrative success could lead to innovative patterns of career development and research productivity for the future.

Would you be kind enough to complete the enclosed questionnaire and return it promptly by **Thursday, May 18th** or at your earliest convenience. Please be assured that confidentiality will be strictly observed.

Thank you for your assistance in this study.

Sincerely,

Anna Vance



# ANDREWS

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## UNIVERSITY

May 1, 1994

Dear Colleague:

A few weeks ago you should have received my doctoral dissertation questionnaire on mentoring and its relationship to role socialization for academic nurse administrators'. If you have completed the questionnaire please accept my thanks and disregard this letter. If you have not yet returned the questionnaire, I would appreciate you taking a few minutes to complete the copy enclosed.

The inclusion of your data will lend greater validity to the findings of the study.

Thank you for your kind attention. I look forward to hearing from you soon.

Sincerely,

Anna Vance

**APPENDIX B**  
**MENTORING ROLE SOCIALIZATION SURVEY INSTRUMENT**

## MENTORING ROLE SOCIALIZATION SURVEY

A mentor is an individual who takes a personal interest in assisting a more junior individual (protégé) to develop the knowledge and skill needed to meet career goals. The mentor takes the protégé "under his/her wing" and through personal assistance and support grooms the protégé in reaching career goals. Please reflect on your professional career development as you answer the following questions:

All individual responses will be kept strictly confidential.

### SECTION A: PROFESSIONAL INFORMATION

1. How long have you been an academic nurse administrator?  
\_\_\_\_\_year(s)
2. What is your present age?  
\_\_\_\_\_years
3. State your gender.  
\_\_\_Male  
\_\_\_Female
4. What is your academic rank?  
\_\_\_Professor  
\_\_\_Associate professor  
\_\_\_Assistant professor  
\_\_\_Instructor  
\_\_\_Other (please specify) \_\_\_\_\_
5. What is your current job title?  
Title: \_\_\_\_\_
6. Which academic degree provided you the specific preparation for the academic nurse administrator role?  
\_\_\_B.S.N      \_\_\_Ed.D    \_\_\_M.S.N      \_\_\_D.S.N.      \_\_\_Ph.D  
\_\_\_Other (Please specify) \_\_\_\_\_
7. What other programs assisted you in the preparation for the present role?  
\_\_\_Internship                      \_\_\_Continuing education  
\_\_\_Mentoring                        \_\_\_Workshops/seminars  
\_\_\_None                                \_\_\_Other (Please specify) \_\_\_\_\_

8. How many years have you served as a full-time faculty member in any college or university nursing program prior to your present position?

\_\_\_ years

9. What administrative experience did you gain prior to your present position?

Experience	Year(s)	Titles
___ Nursing education	_____	_____
___ Non-nursing education	_____	_____
___ Nursing service	_____	_____
___ Other (Please specify)	_____	_____

10. Who encouraged you to enter academic administration? (Please check all that apply)

___ Parents	___ Peers/colleagues in nursing
___ Spouse	___ Peers/colleagues in non-nursing
___ Mentor/role model	___ Other _____

11. What factors do you consider to have been most significant to your achievement in your present administrative role? Please number them in their order of significance.

\_\_\_ Academic preparation for the role  
 \_\_\_ Experiential preparation for the role  
 \_\_\_ Formal internship in academic administration  
 \_\_\_ The guidance of a particular role model/mentor  
 \_\_\_ Personal qualities and abilities  
 \_\_\_ Other \_\_\_\_\_

#### **SECTION B: MENTOR-Protégé CHARACTERISTICS**

12. Did you have a special person(s) in your career development whom you would call a mentor?

\_\_\_ Yes      If yes, specify number of mentor(s): \_\_\_\_\_.  
 \_\_\_ No      If no, please answer question 14 and question 45 to 58.

13. How long did the mentor-protégé RELATIONSHIP with your most significant mentor last?

\_\_\_ year(s)

14. If you did not have a mentor, would it have made a difference to your career progress if you had a mentor?

\_\_\_ Yes  
 \_\_\_ No

15. Would you recommend a mentoring relationship for prospective academic nurse administrators?

☐ Yes

☐ No

16. Which ONE of the following categories best describes the special person who served as you most significant mentor? Check only one response.

☐ Teacher/instructor

☐ Peer

☐ Relative

☐ Spouse

☐ Supervisor

☐ Counselor

☐ Friend

☐ Other

17. In what type of setting did your mentoring experience most usually occur?

☐ educational setting

☐ work setting

☐ professional setting

☐ other (please specify) \_\_\_\_\_

18. To what extent do you agree or disagree that the following items describe the characteristics of your relationship with your most significant mentor? Circle the appropriate response.  
your most significant mentor? Check Yes or No.

1-Strongly Disagree

2-Disagree

3-Not Sure

4-Agree

5-Strongly Agree

**The mentor relationship**

a.	was supportive . . . . .	1	2	3	4	5
b.	was intellectually stimulating . . . . .	1	2	3	4	5
c.	limited my career progress . . . . .	1	2	3	4	5
d.	encouraged independent growth . . . . .	1	2	3	4	5
e.	was anxiety producing and non-productive . . . . .	1	2	3	4	5
f.	promoted decision making & testing of ideas . . . . .	1	2	3	4	5
g.	was competitive . . . . .	1	2	3	4	5
h.	fostered exploration of ideas . . . . .	1	2	3	4	5
i.	was controlling . . . . .	1	2	3	4	5
j.	encouraged risk taking . . . . .	1	2	3	4	5
k.	stimulated interest in research . . . . .	1	2	3	4	5
l.	encouraged further education . . . . .	1	2	3	4	5
m.	assisted me towards my present career responsibilities . . . . .	1	2	3	4	5



19. In reflecting on your own experiences how often did your most significant mentor carry out the following functions? Circle the appropriate response.

	1-Never	2-Seldom	3-Occasionally	4-Often	5-Very frequently
a. taught me new skills . . . . .	1	2	3	4	5
b. encouraged my intellectual development . . . . .	1	2	3	4	5
c. Introduced me to important others . . . . .	1	2	3	4	5
d. guided me in clinical activities . . . . .	1	2	3	4	5
e. encouraged decisiveness . . . . .	1	2	3	4	5
f. served as a positive role model . . . . .	1	2	3	4	5
g. provided personal counseling . . . . .	1	2	3	4	5
h. encouraged me to think for myself . . . . .	1	2	3	4	5
i. provided career counseling . . . . .	1	2	3	4	5
j. encouraged me to create my own space . . . . .	1	2	3	4	5
k. identified helpful contacts for assistance or information . . . . .	1	2	3	4	5
l. encouraged me to believe in myself . . . . .	1	2	3	4	5
m. included me in his/her work to provide guided experience . . . . .	1	2	3	4	5
n. provided for two-way exchange of ideas . . . . .	1	2	3	4	5
o. encouraged me to write and publish my ideas . . . . .	1	2	3	4	5
p. stimulated me to pursue further education . . . . .	1	2	3	4	5
q. encouraged me to become involved in research . . . . .	1	2	3	4	5
r. involved me with his/her professional contacts . . . . .	1	2	3	4	5
s. assisted me with identifying financial support and/or grant writing . . . . .	1	2	3	4	5
t. constructively critiqued my work . . . . .	1	2	3	4	5
u. gave me advice in dealing with specific situations and problem-solving . . . . .	1	2	3	4	5
v. wrote letters of reference for me . . . . .	1	2	3	4	5
w. other (please specify)					

20. While you were a protégé did your mentor(s) involve you in any of the following activities? Circle the appropriate response.

	1-Never	2-Seldom	3-Occasionally	4-Often	5-Very frequently
a. Teaching . . . . .	1	2	3	4	5
b. Functioning in an administrative position . . . . .	1	2	3	4	5
c. Planning research . . . . .	1	2	3	4	5
d. Developing research design . . . . .	1	2	3	4	5
e. Developing research data collection instruments . . . . .	1	2	3	4	5
f. Conducting research . . . . .	1	2	3	4	5
g. Writing a book/article . . . . .	1	2	3	4	5
h. Problem analysis . . . . .	1	2	3	4	5
i. Carrying out research projects . . . . .	1	2	3	4	5
j. Writing a research paper . . . . .	1	2	3	4	5
k. Presenting a research paper . . . . .	1	2	3	4	5
l. Consulting . . . . .	1	2	3	4	5
m. Writing grant proposals . . . . .	1	2	3	4	5
n. Reviewing research proposals . . . . .	1	2	3	4	5
o. Curriculum issues . . . . .	1	2	3	4	5
p. Faculty evaluation . . . . .	1	2	3	4	5

21. What was your most significant mentor's highest level of formal education? Check the appropriate item.
- |   |   |
|---|---|
| <input type="checkbox"/> Elementary school          | <input type="checkbox"/> Baccalaureate degree |
| <input type="checkbox"/> High school                | <input type="checkbox"/> Master's degree      |
| <input type="checkbox"/> College course (no degree) | <input type="checkbox"/> Doctorate            |
| <input type="checkbox"/> Associate degree           | <input type="checkbox"/> Post-doctoral work   |
22. Was your most significant mentor a nurse? Check the appropriate item.
- ☐ Yes. If yes, specify mentor's current title/position: \_\_\_\_\_
- ☐ No
23. How would you rate your mentor's role to your career satisfaction?
- ☐ Not at all important
- ☐ Somewhat important
- ☐ Very important
24. At what stage in your professional career development would having a mentor be most beneficial? Check only one response.
- ☐ Between generic nursing program and Master's program
- ☐ During the Master's program
- ☐ Between Master's program and doctoral program
- ☐ During the doctoral program
- ☐ After the doctoral program
- ☐ Beginning of professional career
25. How would you describe your present relationship with your most significant mentor? Circle the appropriate response.
- |  | 1-Yes | 2-No |
|--|-------|------|
| a. close friends . . . . .                 | 1     | 2    |
| b. peer/colleague . . . . .                | 1     | 2    |
| c. modest friendship . . . . .             | 1     | 2    |
| d. have lost contact with mentor . . . . . | 1     | 2    |
| e. mentor is deceased . . . . .            | 1     | 2    |
| f. have frequent contacts . . . . .        | 1     | 2    |
| g. competitive relationship . . . . .      | 1     | 2    |
| h. professional associate only . . . . .   | 1     | 2    |
| i. negative relationship . . . . .         | 1     | 2    |
| j. other (please specify)                  |       |      |

**SECTION C: ROLE SOCIALIZATION**

Socialization is a process used to gain knowledge, skills, and behaviors in order to participate as a member of a particular group. Socialization is primarily a process through which an occupational identity is gained and the values and norms of a profession are internalized and transmitted.

How often were you assisted by your most significant mentor in the performance of the following functions? Circle the appropriate response.

1-Never                  2-Seldom                  3-Often                  4-Very frequently                  5-Always

**ROLE SOCIALIZATION FUNCTIONS**

- |     |  |   |   |   |   |   |
|-----|--|---|---|---|---|---|
| 26. | Serving on the University's/college's central policy making body, senate or committee .....  | 1 | 2 | 3 | 4 | 5 |
| 27. | Assist in the control of disbursement of monies coming directly to your unit from grants and other sources .....                                 | 1 | 2 | 3 | 4 | 5 |
| 28. | Assisting, directing and supervising the work of individuals within the unit .....   | 1 | 2 | 3 | 4 | 5 |
| 29. | Assist in evaluating faculty performance for reappointment, promotion and tenure .....   | 1 | 2 | 3 | 4 | 5 |
| 30. | Assist in formulating criteria for retention and graduation of students in the unit .....  | 1 | 2 | 3 | 4 | 5 |
| 31. | Monitor attrition profiles and make futuristic recommendations .....   | 1 | 2 | 3 | 4 | 5 |
| 32. | Assist in serving as a central source of information regarding your unit within the university and community .....                               | 1 | 2 | 3 | 4 | 5 |
| 33. | Assist in establishing goals for the unit by looking at the forecast within the profession .....   | 1 | 2 | 3 | 4 | 5 |
| 34. | Assist in the administration of the annual operating budget allocated to the unit ..   | 1 | 2 | 3 | 4 | 5 |
| 35. | Assist in writing grant proposals and/or reviewing research proposals .....  | 1 | 2 | 3 | 4 | 5 |
| 36. | Assist in research involvement, writing and publishing .....   | 1 | 2 | 3 | 4 | 5 |
| 37. | Assist in conducting student recruitment activities for the unit apart from the general recruitment of the university/college .....              | 1 | 2 | 3 | 4 | 5 |
| 38. | Assist in the supervision, development, evaluation and revision of the curriculum ..   | 1 | 2 | 3 | 4 | 5 |
| 39. | Participate as a co-chairperson in faculty meetings and other decision-making meetings involving faculty within the unit .....                   | 1 | 2 | 3 | 4 | 5 |
| 40. | Participate in preparing long-range budget outlines and goals that reflects the financial needs of the unit and institutional cost studies ..... | 1 | 2 | 3 | 4 | 5 |
| 41. | Assist in the revisions and updates of policies that affect both the student and the faculty in the unit .....                                   | 1 | 2 | 3 | 4 | 5 |
| 42. | Collaborate with deans of other units or administrators of the university/college ..   | 1 | 2 | 3 | 4 | 5 |
| 43. | Serve on advisory committees to other units within the university/college community .....  | 1 | 2 | 3 | 4 | 5 |
| 44. | Receive support in decision-making and encouragement towards creating an identity as a future administrator .....                                | 1 | 2 | 3 | 4 | 5 |

**PRESENT EXECUTIVE PROFILE**

Listed below are many of the skills needed to perform the role as an academic nurse administrator. To what extent do you agree with the following statements as they relate to your present administrative role? Circle the appropriate response.

- |   | 1-Strongly disagree | 2-Disagree | 3-Not sure | 4-Agree | 5-Strongly agree |
|---|---------------------|------------|------------|---------|------------------|
| 45. Nurses who hold a graduate or higher degree in nursing are stronger advocates for nursing than nurses who hold graduate degrees in other fields ..... | 1                   | 2          | 3          | 4       | 5                |
| 46. I did not expect to work so hard to obtain and maintain resources for the unit I administer .....   | 1                   | 2          | 3          | 4       | 5                |
| 47. I am satisfied with my work in academic administration .....  | 1                   | 2          | 3          | 4       | 5                |
| 48. I am competent in the areas of business and marketing .....   | 1                   | 2          | 3          | 4       | 5                |
| 49. I am competent to carry out management of the financial dimensions of my job ..   | 1                   | 2          | 3          | 4       | 5                |
| 50. I am satisfied with the financial reimbursement of my position .....  | 1                   | 2          | 3          | 4       | 5                |
| 51. I did not expect my position to be as demanding of time and personal energy ...   | 1                   | 2          | 3          | 4       | 5                |
| 52. It is important for nurses moving into higher level management positions to have a mentor .....   | 1                   | 2          | 3          | 4       | 5                |
| 53. It is important that I act as a mentor for future academic nurse administrators .....   | 1                   | 2          | 3          | 4       | 5                |
| 54. The type of educational background of the nurse executive does not make a difference for this position .....  | 1                   | 2          | 3          | 4       | 5                |
| 55. I am satisfied with my current role and level of position .....   | 1                   | 2          | 3          | 4       | 5                |
| 56. Being on the executive level I feel removed from the profession of nursing .....  | 1                   | 2          | 3          | 4       | 5                |
| 57. The best preparation for the administration position is graduate education or higher .....  | 1                   | 2          | 3          | 4       | 5                |
| 58. I would highly recommend a mentoring affiliation for academic nurse administrators prior to holding full authority for the position .....             | 1                   | 2          | 3          | 4       | 5                |

**THANK YOU FOR YOUR TIME. PLEASE USE THE ENCLOSED POSTAGE-PAID ENVELOPE TO RETURN THIS COMPLETED QUESTIONNAIRE.**

**APPENDIX C**  
**TABLES**

**TABLE 28**  
**MENTOR RELATIONSHIP**

	1--Strongly Disagree	2--Disagree	3--Not Sure	4--Agree	5--Strongly Agree
The Mentor Relationship (n=112)	Percentage	Percentage	Percentage	Percentage	Percentage
Was supportive	0.90	0.00	0.90	26.80	71.40
Was intellectually stimulating	0.90	0.90	11.60	27.70	58.90
Limited my career progress	75.90	19.60	0.90	1.80	1.80
Encouraged independent growth	2.70	0.90	7.10	44.60	44.60
Was anxiety producing & nonproductive	70.50	21.40	0.90	2.70	4.50
Promoted decision making and testing of ideas	4.50	0.90	6.20	50.00	38.40
Was competitive	33.90	29.50	8.90	17.00	10.70
Fostered exploration of ideas	3.60	1.80	7.10	47.30	40.20
Was controlling	43.70	33.00	5.40	11.60	6.20
Encouraged risk taking	3.60	7.10	6.20	48.20	34.80
Stimulated interest in research	4.50	11.60	20.50	37.50	25.90
Encouraged further education	3.60	7.10	7.10	33.90	48.20
Assisted me towards my present career responsibilities	3.60	1.80	6.20	37.50	50.90

**TABLE 29**  
**FUNCTIONS IN THE MENTOR-PROTÉGÉ RELATIONSHIP**

Functions in the Mentor-Protégé Relationship (n=112)	1--Never	2--Seldom	3--Occasionally	4--Often	5--Very Frequently
	Percentage	Percentage	Percentage	Percentage	Percentage
Taught new skills	4.50	3.60	28.60	40.20	23.20
Encouraged intellectual development	0.90	0.00	11.60	42.00	45.50
Introduced to important others	0.90	8.00	16.10	28.60	46.40
Guided in clinical activities	27.70	21.40	16.10	17.90	17.00
Encouraged decisiveness	1.80	5.40	17.90	42.00	33.00
Served as a positive role model	0.00	0.00	7.10	34.80	58.00
Provided personal counseling	9.80	14.30	22.30	27.70	25.90
Encouraged to think for myself	1.80	0.90	8.00	47.30	42.00
Provided career counseling	6.20	10.70	18.80	37.50	26.80
Encouraged to create own space	8.00	10.70	15.20	34.80	31.30
Identified helpful contacts for assistance	4.50	5.40	18.80	33.00	38.40
Encouraged to believe in myself	0.90	2.70	12.50	33.90	50.00
Included in work	2.70	6.20	17.00	37.50	36.60
Provided for two-way exchange of ideas	0.90	1.80	6.20	48.20	42.90
Encouraged to write and publish ideas	8.90	9.80	25.00	26.80	29.50
Stimulated to pursue further education	8.00	4.50	12.50	33.00	42.00
Encouraged to become involved in research	9.80	11.60	25.90	23.20	29.50
Involved in professional contacts	2.70	14.30	16.10	32.10	34.80
Assisted with financial support & grant writing	14.30	17.90	26.80	17.90	23.20
Constructively critiqued work	6.20	4.50	19.60	33.90	35.70
Problem-solving	4.50	2.70	17.00	35.70	40.20
Wrote letters of reference	12.50	2.70	13.40	25.90	45.50

**TABLE 30**  
**FUNCTIONS IN THE MENTOR-PROTÉGÉ RELATIONSHIP**

Activities in the Mentor-Protege Relationship (n=112)	1--Never	2--Seldom	3--Occa- sionally	4--Often	5--Very Frequently
	Percentage	Percentage	Percentage	Percentage	Percentage
Teaching	18.80	4.50	22.30	24.10	30.40
Functioning in an administrative position	12.50	8.90	13.40	31.30	33.90
Planning research	16.10	17.90	40.20	11.60	14.30
Developing research design	17.90	21.40	33.90	12.50	14.30
Developing research data collection instruments	24.10	17.00	31.30	16.10	11.60
Conducting research	25.90	17.00	26.80	17.90	12.50
Writing a book/article	22.30	17.90	26.80	17.90	15.20
Problem analysis	6.20	4.50	15.20	44.60	29.50
Carrying out research projects	22.30	21.40	25.00	17.00	14.30
Writing a research paper	25.00	21.40	26.80	14.30	12.50
Presenting a research paper	27.70	18.80	23.20	15.0	15.20
Consulting	19.60	12.50	21.40	29.50	17.00
Writing grant proposals	25.00	18.80	23.20	17.00	16.10
Reviewing research proposals	31.30	22.30	18.80	14.30	13.40
Curriculum issues	8.90	4.50	12.50	38.40	35.70
Faculty evaluation	10.70	8.00	15.20	35.70	30.40



**TABLE 31**  
**ROLE SOCIALIZATION FUNCTIONS**

	1--Never	2--Seldom	3--Occasionally	4--Often	5--Very Frequently
Role Socialization Functions (n=112)	Percentage	Percentage	Percentage	Percentage	Percentage
Serving on the University's/college's central policy making body, senate or committee	13.50	15.30	35.10	20.70	15.30
Assist in the control of disbursement of monies coming directly to your unit from grants and other sources	26.80	23.20	27.70	14.30	8.00
Assisting, directing and supervising the work of individuals within the unit	13.50	18.80	27.70	25.00	15.20
Assist in evaluating faculty performance for reappointment, promotion and tenure	19.60	17.90	26.80	22.30	13.40
Assist in formulating criteria for retention and graduation of students in the unit	14.30	17.00	9.80	41.10	17.90
Monitor attrition profiles and make futuristic recommendations	19.60	17.90	19.60	26.80	16.10
Assist in serving as a central source of information regarding your unit	12.50	8.00	31.30	27.70	20.50
Assist in establishing goals for the unit by looking at the forecast within the profession	12.50	12.50	33.00	29.50	12.50
Assist in the administration of the annual operating budget allocated to the unit	29.50	33.90	16.10	10.70	9.80
Assist in writing grant proposals and/or reviewing research proposals	25.00	22.30	28.60	17.00	7.10
Assist in research involvement, writing and publishing	27.70	25.90	28.60	12.50	5.40
Assist in conducting student recruitment activities for the unit	21.40	24.10	14.30	27.70	12.50
Assist in the supervision, development, evaluation and revision of the curriculum	13.40	10.70	14.30	37.50	23.20
Participates as a co-chairperson in faculty meetings and other decision-making meetings	25.00	14.30	19.60	23.20	17.00
Participate in preparing long-range budget outlines and goals	27.70	21.40	25.00	18.80	7.10
Assist in the revisions and updates of policies that affect both the student and the faculty in the unit	13.40	11.60	34.80	24.10	16.10
Collaborate with deans of other units or administrators of the university/college	14.30	22.30	26.80	25.00	11.60
Serve on advisory committees to other units within the university/college community	15.20	26.80	21.40	27.70	8.90
Receive support in decision-making and encouragement towards creating an identity as a future administrator	6.20	8.90	20.50	39.30	25.00

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